

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY**

In re:

NEW ENGLAND MOTOR FREIGHT, INC.,
et al.,

Debtors.¹

Chapter 11

Case No. 19-12809 (JKS)

(Jointly Administered)

**GLOBAL NOTES, METHODOLOGY AND SPECIFIC
DISCLOSURES REGARDING THE DEBTORS' SCHEDULES OF
ASSETS AND LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS**

Introduction

New England Motor Freight, Inc., Eastern Freight Ways, Inc., NEMF World Transport, Inc., Apex Logistics, Inc., Jans Leasing Corp., Carrier Industries, Inc., Myar, LLC, MyJon, LLC, Hollywood Avenue Solar, LLC, United Express Solar, LLC, and NEMF Logistics, LLC (collectively, the “**Debtors**”)² with the assistance of their advisors, have filed their respective Schedules of Assets and Liabilities (the “**Schedules**”) and Statements of Financial Affairs (the “**Statements**,” and together with the Schedules, the “**Schedules and Statements**”) with the United States Bankruptcy Court for the District of New Jersey (the “**Bankruptcy Court**”), pursuant to section 521 of title 11 of the United States Code (the “**Bankruptcy Code**”) and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the “**Bankruptcy Rules**”).

These Global Notes, Methodology, and Specific Disclosures Regarding the Debtors’ Schedules of Assets and Liabilities and Statement of Financial Affairs (the “**Global Notes**”) pertain to, are incorporated by reference in, and comprise an integral part of each Debtor’s Schedules and Statements. The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and Statements.

The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States (“**GAAP**”), nor are they intended to be fully reconciled with the financial statements of each Debtor (whether publicly filed or otherwise). Additionally, the Schedules and Statements

¹ The Debtors in these chapter 11 cases and the last four digits of each Debtor’s taxpayer identification number are as follows: New England Motor Freight, Inc. (7697); Eastern Freight Ways, Inc. (3461); NEMF World Transport, Inc. (2777); Apex Logistics, Inc. (5347); Jans Leasing Corp. (9009); Carrier Industries, Inc. (9223); Myar, LLC (4357); MyJon, LLC (7305); Hollywood Avenue Solar, LLC (2206); United Express Solar, LLC (1126); and NEMF Logistics, LLC (4666).

² A detailed description of the Debtors and their businesses, and the facts and circumstances surrounding the Debtors’ chapter 11 cases are set forth in the *Declaration of Vincent Colistra in Support of Debtors’ Chapter 11 Petitions and First Day Motions* filed contemporaneously with the Debtors’ voluntary chapter 11 petitions for relief filed under the Bankruptcy Code on February 11, 2019 [Dkt No. 22].

contain unaudited information that is subject to further review and potential adjustment, and reflect the Debtors' reasonable efforts to report the assets and liabilities of each Debtor on an unconsolidated basis. Moreover, given, among other things, the uncertainty surrounding the collection and ownership of certain assets and the valuation and nature of certain liabilities, to the extent that a Debtor shows more assets than liabilities, this is not an admission that the Debtor was solvent as of the Petition Date (as defined below) or at any time before the Petition Date. Likewise to the extent a Debtor shows more liabilities than assets, this is not an admission that the Debtor was insolvent at any time before the Petition Date or on the Petition Date.

In preparing the Schedules and Statements, the Debtors relied upon information derived from their books and records that was available at the time of such preparation. Although the Debtors have made reasonable efforts to ensure the accuracy and completeness of such financial information, inadvertent errors or omissions, as well as the discovery of conflicting, revised, or subsequent information, may cause a material change to the Schedules and Statements.

The Debtors and their officers, employees, agents, attorneys, and financial advisors do not guarantee or warrant the accuracy or completeness of the data that is provided in the Schedules and Statements and shall not be liable for any loss or injury arising out of or caused in whole or in part by the acts, omissions, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating or delivering the information contained in the Schedules and Statements. Except as expressly required by the Bankruptcy Code, the Debtors and their officers, employees, agents, attorneys and financial advisors expressly do not undertake any obligation to update, modify, revise, or re-categorize the information provided in the Schedules and Statements or to notify any third party should the information be updated, modified, revised, or re-categorized. The Debtors, on behalf of themselves, their officers, employees, agents and advisors disclaim any liability to any third party arising out of or related to the information contained in the Schedules and Statements and reserve all rights with respect thereto.

Mr. Vince Colistra has signed each of the Schedules and Statements in his capacity as Chief Restructuring Officer of each of the Debtors. In reviewing and signing the Schedules and Statements, Mr. Colistra has relied upon the efforts, statements and representations of various personnel employed by the Debtors. Mr. Colistra has not (and could not have) personally verified the accuracy of each such statement and representation, including, for example, statements and representations concerning amounts owed to creditors and their addresses.

The Global Notes are in addition to any specific notes contained in each Debtor's Schedules and Statements. The fact that the Debtors have prepared Global Notes or specific notes with respect to any information in the Schedules and Statements and not to other information in the Schedules and Statements should not be interpreted as a decision by the Debtors to exclude the applicability of such Global Notes or specific notes to any of the Debtors' remaining Schedules and Statements, as appropriate.

Global Notes and Overview of Methodology

1. Reservation of Rights. Reasonable efforts have been made to prepare and file complete

and accurate Schedules and Statements; however, inadvertent errors or omissions may exist. The Debtors reserve all rights to amend or supplement the Schedules and Statements from time to time, in all respects, as may be necessary or appropriate, including, without limitation, the right to amend the Schedules and Statements with respect to any claim (“**Claim**”) description, designation, or Debtor against which the Claim is asserted; dispute or otherwise assert offsets or defenses to any Claim reflected in the Schedules and Statements as to amount, liability, priority, status, or classification; subsequently designate any Claim as “disputed,” “contingent,” or “unliquidated;” or object to the extent, validity, enforceability, priority, or avoidability of any Claim. Any failure to designate a Claim in the Schedules and Statements as “disputed,” “contingent,” or “unliquidated” does not constitute an admission by the Debtors that such Claim or amount is not “disputed,” “contingent,” or “unliquidated.” Listing a Claim does not constitute an admission of liability by the Debtor against which the Claim is listed or against any of the Debtors. Furthermore, nothing contained in the Schedules and Statements shall constitute a waiver of rights with respect to the Debtors’ chapter 11 cases, including, without limitation, issues involving Claims, substantive consolidation, defenses, equitable subordination, recharacterization, and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code, and any other relevant non-bankruptcy laws to recover assets or avoid transfers. Any specific reservation of rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph. Notwithstanding the foregoing, the Debtors shall not be required to update the Schedules and Statements.

The listing in the Schedules or Statements (including, without limitation, Schedule A/B, Schedule E/F or Statement 4) by the Debtors of any obligation between a Debtor and another Debtor is a statement of what appears in the Debtors’ books and records and does not reflect any admission or conclusion of the Debtors regarding whether such amount would be allowed as a Claim or how such obligations may be classified and/or characterized in a plan of reorganization or by the Bankruptcy Court.

2. **Description of Cases and “as of” Information Date.** On February 11, 2019 (the “**Petition Date**”), the Debtors filed voluntary petitions for relief under chapter 11 of the Bankruptcy Code. The Debtors are operating their businesses and managing their properties as debtors in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code. On February 13, 2019, the Bankruptcy Court entered an order directing procedural consolidation and joint administration of the Debtors’ chapter 11 cases [Docket No. 44].

The asset information provided in the Schedules and Statements, except as otherwise noted, represents the asset data of the Debtors as of January 31, 2019, and the liability information provided herein, except as otherwise noted, represents the liability data of the Debtors as of February 11, 2019.

3. **Net Book Value of Assets.** It would be prohibitively expensive, unduly burdensome, and an inefficient use of estate assets for the Debtors to obtain current market valuations for all of their assets. Accordingly, unless otherwise indicated, the Debtors’ Schedules and Statements reflect net book values as of January 31, 2019, in the Debtors’ books and records. Additionally, because the book values of certain assets, may materially differ from their fair market values, they may be listed as undetermined amounts as of the

Petition Date. Furthermore, as applicable, assets that have fully depreciated or were expensed for accounting purposes may not appear in the Schedules and Statements if they have no net book value.

4. **Recharacterization.** Notwithstanding the Debtors' reasonable efforts to properly characterize, classify, categorize, or designate certain Claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statements, the Debtors may, nevertheless, have improperly characterized, classified, categorized, designated, or omitted certain items due to the complexity and size of the Debtors' businesses. Accordingly, the Debtors reserve all of their rights to recharacterize, reclassify, recategorize, redesignate, add, or delete items reported in the Schedules and Statements at a later time as is necessary or appropriate as additional information becomes available, including, without limitation, whether contracts or leases listed herein were deemed executory or unexpired as of the Petition Date and remain executory and unexpired postpetition.
5. **Real Property and Personal Property-Leased.** In the ordinary course of their businesses, the Debtors leased real property and various articles of personal property, including, fixtures, and equipment, from certain third-party lessors. The Debtors have made reasonable efforts to list all such leases in the Schedules and Statements. The Debtors have made reasonable efforts to include lease obligations on Schedule D (secured debt) to the extent applicable and to the extent the lessor filed a UCC-1. However, nothing in the Schedules or Statements is or shall be construed as an admission or determination as to the legal status of any lease (including whether to assume and assign or reject such lease or whether it is a true lease or a financing arrangement).
6. **Excluded Assets and Liabilities.** The Debtors have sought to allocate liabilities between the prepetition and post-petition periods based on the information and research conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further research is conducted, the allocation of liabilities between the prepetition and post-petition periods may change.

The liabilities listed on the Schedules do not reflect any analysis of Claims under section 503(b)(9) of the Bankruptcy Code. Accordingly, the Debtors reserve all of their rights to dispute or challenge the validity of any asserted Claims under section 503(b)(9) of the Bankruptcy Code or the characterization of the structure of any such transaction or any document or instrument related to any creditor's Claim.

The Debtors have excluded certain categories of assets, tax accruals, and liabilities from the Schedules and Statements, including, without limitation, goodwill, accrued salaries, employee benefit accruals, and deferred gains. In addition, certain immaterial assets and liabilities may have been excluded.

The Bankruptcy Court has authorized the Debtors to pay, in their discretion, certain outstanding Claims on a post-petition basis. Prepetition liabilities which have been paid post-petition have been excluded from the Schedules and Statements. To the extent the Debtors pay any of the claims listed in the Schedules and Statements pursuant to any orders entered by the Bankruptcy Court, the Debtors reserve all rights to amend and supplement the Schedules and Statements and take other action, such as filing claims

objections, as is necessary and appropriate to avoid overpayment or duplicate payment for such liabilities.

7. **Insiders.** Solely, for purposes of the Schedules and Statements, the Debtors define “insiders” to include the following: (a) directors; (b) senior level officers; (c) equity holders holding in excess of 5% of the voting securities of the Debtor entities; (d) Debtor affiliates; (e) trusts; (f) trust beneficiaries; and (g) relatives of any of the foregoing (to the extent known by the Debtors). Entities listed as “insiders” have been included for informational purposes and their inclusion shall not constitute an admission that those entities are insiders for purposes of section 101(31) of the Bankruptcy Code.
8. **Intellectual Property Rights.** The exclusion of any intellectual property shall not be construed as an admission that such intellectual property rights have been abandoned, terminated, assigned, expired by their terms, or otherwise transferred pursuant to a sale, acquisition, or other transaction. Conversely, inclusion of certain intellectual property shall not be construed to be an admission that such intellectual property rights have not been abandoned, terminated, assigned, expired by their terms, or otherwise transferred pursuant to a sale, acquisition, or other transaction.

In addition, although the Debtors have made diligent efforts to attribute intellectual property to the rightful Debtor entity, in certain instances, intellectual property owned by one Debtor may, in fact, be owned by another Debtor. Accordingly, the Debtors reserve all of their rights with respect to the legal status of any and all such intellectual property rights.

9. **Intercompany and Other Transactions.** For certain reporting and internal accounting purposes, the Debtors record certain intercompany receivables and payables. Receivables and payables among the Debtors are reported as assets on Schedule A/B or liabilities on Schedule E/F part 2, as appropriate (collectively, the “*Intercompany Claims*”). Intercompany Claims are reported as of January 31, 2019, updated, where practical, to reflect values as of the Petition Date for accounts that have had material changes since January 31, 2019. While the Debtors have used commercially reasonable efforts to ensure that the proper intercompany balance is attributed to each legal entity, the Debtors and their estates reserve all rights to amend the Intercompany Claims in the Schedules and Statements, including, without limitation, to change the characterization, classification, categorization or designation of such claims, including, but not limited to, the right to assert that any or all Intercompany Claims are, in fact, consolidated or otherwise properly assets or liabilities of a different Debtor entity. Although separate Schedules and Statements have been prepared and filed for each of the Debtors, certain of the information set forth in the Schedules and Statements has been prepared on a consolidated basis. As a result, the Schedules and Statements may not reflect all intercompany activity.
10. **Executory Contracts and Unexpired Leases.** Although the Debtors made diligent attempts to attribute executory contracts and unexpired leases to their rightful Debtors, in certain instances, the Debtors may have inadvertently failed to do so due to the complexity and size of the Debtors’ businesses. Accordingly, the Debtors reserve all of their rights with respect to the named parties of any and all executory contracts and unexpired leases, including the right to amend Schedule G.

Moreover, other than real property leases reported in Schedule A/B 55, the Debtors have not necessarily set forth executory contracts and unexpired leases as assets in the Schedules and Statements, even though these contracts and leases may have some value to the Debtors' estates. The Debtors' executory contracts and unexpired leases have been set forth in Schedule G.

11. Materialman's/Mechanic's Liens. The assets listed in the Schedules and Statements are presented without consideration of any materialman's or mechanic's liens.

12. Classifications. Listing a Claim or contract on (a) Schedule D as "secured," (b) Schedule E/F part 1 as "priority," (c) Schedule E/F part 2 as "unsecured," or (d) Schedule G as "executory" or "unexpired," does not constitute an admission by the Debtors of the legal rights of the Claimant, or a waiver of the Debtors' rights to recharacterize or reclassify such Claims or contracts or leases or to exercise their rights to setoff against such Claims.

13. Claims Description. Schedules D and E/F permit each Debtor to designate a Claim as "disputed," "contingent," and/or "unliquidated." Any failure to designate a Claim on a given Debtor's Schedules and Statements as "disputed," "contingent," or "unliquidated" does not constitute an admission by that Debtor that such amount is not "disputed," "contingent," or "unliquidated," or that such Claim is not subject to objection. The Debtors reserve all of their rights to dispute, or assert offsets or defenses to, any Claim reflected on their respective Schedules and Statements on any grounds, including liability or classification. Additionally, the Debtors expressly reserve all of their rights to subsequently designate such claims as "disputed," "contingent," and/or "unliquidated." Moreover, listing a Claim does not constitute an admission of liability by the Debtors.

14. Causes of Action. Despite their reasonable efforts to identify all known assets, the Debtors may not have listed all of their causes of action or potential causes of action against third-parties as assets in the Schedules and Statements, including, without limitation, causes of actions arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. The Debtors reserve all of their rights with respect to any cause of action (including avoidance actions), controversy, right of setoff, cross-Claim, counter-Claim, or recoupment and any Claim on contracts or for breaches of duties imposed by law or in equity, demand, right, action, lien, indemnity, guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege, license, and franchise of any kind or character whatsoever, known, unknown, fixed or contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated, disputed or undisputed, secured or unsecured, assertable directly or derivatively, whether arising before, on, or after the Petition Date, in contract or in tort, in law, or in equity, or pursuant to any other theory of law (collectively, "**Causes of Action**") they may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any Claims or Causes of Action or in any way prejudice or impair the assertion of such Claims or Causes of Action.

15. Summary of Significant Reporting Policies. The following is a summary of significant reporting policies:

- a. Undetermined Amounts. The description of an amount

as “unknown,” “TBD” or “undetermined” is not intended to reflect upon the materiality of such amount.

- b. Totals. All totals that are included in the Schedules and Statements represent totals of all known amounts. To the extent there are unknown or undetermined amounts, the actual total may be different than the listed total.
- c. Liens. Property and equipment listed in the Schedules and Statements are presented without consideration of any liens that may attach (or have attached) to such property and equipment.

16. Estimates and Assumptions. Because of the timing of the filings, management was required to make certain estimates and assumptions that affected the reported amounts of these assets and liabilities. Actual amounts could differ from those estimates, perhaps materially.

17. Currency. Unless otherwise indicated, all amounts are reflected in U.S. dollars.

18. Intercompany. The listing in the Schedules or Statements (including, without limitation, Schedule A/B or Schedule E/F) by the Debtors of any obligation between a Debtor and another Debtor is a statement of what appears in the Debtors’ books and records and does not reflect any admission or conclusion of the Debtors regarding whether such amount would be allowed as a Claim or how such obligations may be classified and/or characterized in a plan of reorganization or by the Bankruptcy Court.

19. Setoffs. The Debtors incur certain offsets and other similar rights during the ordinary course of business. Offsets in the ordinary course can result from various items, including, without limitation, intercompany transactions, pricing discrepancies, returns, refunds, warranties, debit memos, credits, and other disputes between the Debtors and their suppliers and/or customers. These offsets and other similar rights are consistent with the ordinary course of business in the Debtors’ industry and are not tracked separately. Therefore, although such offsets and other similar rights may have been accounted for when certain amounts were included in the Schedules, offsets are not independently accounted for, and as such, are or may be excluded from the Debtors’ Schedules and Statements.

20. Employee Addresses. Employee addresses have been removed from entries listed on Schedules E/F and G and the Statements, as applicable. These addresses are available upon request of the Office of the United States Trustee and the Bankruptcy Court. Service of pleadings and documents to employees by the Debtors’ court-approved claims and noticing agent will be made to each employee’s home address as such address exist on the Debtors’ books and records.

21. Global Notes Control. If the Schedules and Statements differ from these Global Notes, the Global Notes shall control.

Specific Disclosures with Respect to the Debtors' Schedules

Schedule A/B. All values set forth in Schedule A/B reflect the book value of the Debtors' assets as of January 31, 2019, unless otherwise noted below. Other than real property leases reported on Schedule A/B 55, the Debtors have not included leases and contracts on Schedule A/B. Leases and contracts are listed on Schedule G.

Schedule A/B 3. Cash values held in financial accounts are listed on Schedule A/B 3 as of February 11, 2019. Details with respect to the Debtors' cash management system and bank accounts are provided in the *Debtors' Motion For Entry Of Interim And Final Orders: (A) Authorizing The Debtors To (I) Continue Their Cash Management System, (Ii) Honor Certain Related Prepetition Obligations, (Iii) Maintain Existing Business Forms, And (Iv) Continue To Perform Intercompany Transactions; (B) Authorizing And Directing The Debtors' Banks To Honor All Related Payment Requests; (C) Granting Interim And Final Waivers Of The Debtors' Compliance With Section 345(B) Of The Bankruptcy Code; (D) Scheduling A Final Hearing; And (E) Granting Related Relief* [Docket No. 12] (the "**Cash Management Motion**").

Schedule A/B 7. The Bankruptcy Court, pursuant to the *Debtors' Motion For Interim And Final Orders Under Section 366 Of The Bankruptcy Code: (A) Prohibiting Utility Providers From Altering, Refusing, Or Discontinuing Service; (B) Deeming Utilities Adequately Assured Of Future Performance; (C) Establishing Procedures For Resolving Requests For Additional Or Different Adequate Assurance Of Payment; And (D) Scheduling A Final Hearing* [Docket No. 21], has authorized the Debtors to provide adequate assurance of payment for postpetition utility services, including a deposit in the amount of \$142,985.00. Such deposit is not listed on Schedule A/B 7, which was prepared as of the Petition Date.

Schedule A/B 11. Accounts receivable do not include intercompany receivables. Intercompany receivables are reported on Schedule A/B 77.

Schedule A/B 15. Ownership interests in subsidiaries have been listed in Schedules A/B 15 as an undetermined amount because the fair market value of such ownership is dependent on numerous variables and factors and likely differs significantly from their net book value.

Schedule A/B 55. The Debtors have listed owned real property in Schedule A/B 55. The Debtors have also listed their real property leases in Schedule A/B 55. With the exception of leasehold improvements for Eastern Freight Ways, Inc., the Debtors have reported all of their leasehold improvements on an aggregate basis under Schedule A/B 55 for New England Motor Freight, Inc.

Schedule A/B 62. The Debtors maintain various licenses in connection with the conduct of their business. The Debtors listed the states in which they are authorized to do business and the types of licenses they hold on Schedule A/B 62, but the detailed list of licenses by license number is voluminous and has not been listed on Schedule A/B 62, as the value is undetermined.

Schedule A/B 63. The Debtors maintain a customer database. The amount is listed as undetermined because the fair market value of such ownership cannot be determined.

Schedule A/B 74 & 75. In the ordinary course of their businesses, the Debtors may have accrued, or may subsequently accrue, certain rights to counter-Claims, setoffs, or refunds. Additionally, certain of the Debtors may be a party to pending litigation in which the Debtors have asserted, or may assert, Claims as a plaintiff or counter-Claims as a defendant. Because such Claims are unknown to the Debtors and not quantifiable as of the Petition Date, they are not listed on Schedule A/B 74 or 75. The Debtors' failure to list any contingent and/or unliquidated claim held by the Debtors in response to these questions shall not constitute a waiver, release, relinquishment, or forfeiture of such claim. In addition, the workers' compensation and medical receivables detailed in response to Schedule A/B 75 are contingent upon actual workers compensation/medical claims or audited premiums and are all scheduled against New England Motor Freight, Inc., as the allocation between Debtors is contingent on the applicable receivable resolution.

Schedule A/B 77. The Debtors have Receivables (due from) and Payables (due to) shareholders, trust accounts, and other insiders (related parties). By each Debtor, and for each related party, the Schedules disclose the receivable amount on Schedule A/B and the payable amount on Schedule E/F. Historically, the Debtor offset the receivables and payables and calculated a consolidated Net Receivable for all Debtors from all related parties. As of February 11, 2019, the Debtors calculate this net number to be \$8,787,747.00. Post February 11, 2019 Myron Shevell paid to the Debtors on behalf of all the related parties, \$8,721,711.00 and will pay the balance, \$66,036.00 in the very near future.

Schedule D. The Claims listed on Schedule D arose or were incurred on various dates; a determination of the date upon which each Claim arose or was incurred would be unduly burdensome and cost prohibitive. Accordingly, not all such dates are included. All Claims listed on Schedule D, however, appear to have been incurred before the Petition Date.

Reference to the applicable loan agreements and related documents is necessary for a complete description of the collateral and the nature, extent, and priority of liens. Nothing in the Global Notes or the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements. With respect to the funded debt lenders listed in Schedule D, each lender is listed as to each Uniform Commercial Code ("UCC") financing statement filed by such lender. However, the total amount of the funded debt claim for each such lender is listed only against the first UCC financing statement, and the remaining UCC financing statement entries are listed in a total claim amount of \$0.00.

Except as specifically stated on Schedule D, real property lessors, utility companies, and other parties that may hold security deposits have not been listed on Schedule D. Nothing herein shall be construed as an admission by the Debtors of the legal rights of the Claimant or a waiver of the Debtors' rights to recharacterize or reclassify such Claim or contract.

Moreover, the Debtors have not included on Schedule D parties that may believe their Claims are secured through setoff rights, letters of credit, surety bonds, or inchoate statutory lien rights.

Schedule E/F part 1. The Debtors have incurred and continue to incur federal, state and/or local taxes. These obligations are estimated, and accordingly, the Debtors' quarterly payments of estimated tax liabilities and accruals for estimated federal, state and/or local taxes are not included in the Schedule E/F part 1.

WARN Act Litigation Claim: On February 14, 2019, an adversary complaint was filed in the Bankruptcy Court, captioned *Mary Carlin and Dan Webster, on their own behalf and on behalf of all other persons similarly situated (collectively, the "WARN Act Plaintiffs")*, v. *New England Motor Freight, Inc.* [Docket No. 51], commencing Adv. Proc. No. 19-01073 (JKS), seeking to certify a class with respect to certain current and former employees of the Debtors for alleged violations of, among other things, the WARN Act (the "WARN Action"). Prior to the Petition Date, NEMF entered into an agreement with the International Association of Machinists and Aerospace Workers ("Union") that provided, among other things, for NEMF to make total severance payments to Union employees equal to the greater of (i) two weeks' salary, or (ii) each Union employee's accrued and unused vacation and personal days, and, under either option, plus an extension of medical benefits up through and including April 13, 2019 at no expense to the terminated Union employees. As part of a global settlement, NEMF extended the same severance benefits to its non-union employees ensuring that both Union and non-Union employees received the same severance benefits (the "Global Settlement"). As part of the approval of the Global Settlement, which was approved by Order of the Bankruptcy Court dated March 1, 2019 [Dkt. No. 155], NEMF agreed to provide the WARN Act Plaintiffs with additional severance payments totaling up to an additional \$2.7 Million, less Court approved attorney's fees to WARN Action counsel of no more than \$300,000, after consideration of an application by WARN Action counsel therefor and any objections thereto by any party-in-interest (other than the Debtors). Such additional severance payments to the WARN Act Plaintiffs will be made by NEMF as promptly as possible upon sufficient funds being available to the NEMF estate as determined by NEMF. As of the date of this filing, no such payments have been made.

Schedule E/F part 2. The Debtors have used reasonable efforts to report all general unsecured Claims against the Debtors on Schedule E/F part 2, based upon the Debtors' books and records as of the Petition Date.

Determining the date upon which each Claim on Schedule E/F part 2 was incurred or arose would be unduly burdensome and cost prohibitive and, therefore, the Debtors do not list a date for each Claim listed on Schedule E/F part 2. Furthermore, claims listed on Schedule E/F part 2 may have been aggregated by unique creditor name and remit to address and may include several dates of incurrence for the aggregate balance listed.

Schedule E/F part 2 contains information regarding pending litigation involving the Debtors. The dollar amount of potential Claims associated with any such pending litigation is listed as "undetermined" and marked as contingent, unliquidated, and disputed in the Schedules and Statements. Some of the litigation Claims listed on Schedule E/F may be subject to subordination pursuant to section 510 of the Bankruptcy Code. Schedule E/F part 2 also includes potential or threatened litigation claims. Any information contained in Schedule E/F part 2 with respect to such potential litigation shall not be a binding representation of the Debtors' liabilities with respect to any of the potential suits and proceedings included therein. The Debtors expressly incorporate by reference into Schedule E/F part 2 all parties to

pending litigation listed in the Debtors' Statements 7, as contingent, unliquidated, and disputed claims, to the extent not already listed on Schedule E/F part 2.

Schedule E/F part 2 reflects the prepetition amounts owing to counterparties to executory contracts and unexpired leases. Such prepetition amounts, however, may be paid in connection with the assumption, or assumption and assignment, of executory contracts or unexpired leases. Additionally, Schedule E/F part 2 does not include potential rejection damage Claims, if any, of the counterparties to executory contracts and unexpired leases that may be rejected.

In addition, the workers' compensation and medical payables in Schedule E/F part 2 are contingent upon actual workers compensation claims and medical claims or audited premiums and are all scheduled against New England Motor Freight, Inc., Eastern Freight Ways, Inc. and Carrier Industries, Inc., as the allocation between Debtors is contingent on the applicable payable resolution.

The Debtors have Receivables (due from) and Payables (due to) shareholders, trust accounts, and other insiders (related parties). By each Debtor, and for each related party, the Schedules disclose the receivable amount on Schedule A/B and the payable amount on Schedule E/F. Historically, the Debtor offset the receivables and payables and calculated a consolidated Net Receivable for all Debtors from all related parties. As of February 11, 2019, the Debtors calculate this net number to be \$8,787,747.00. Post February 11, 2019 Myron Shevell paid to the Debtors on behalf of all the related parties, \$8,721,711.00 and will pay the balance, \$66,036.00 in the very near future.

Schedule G. Although reasonable efforts have been made to ensure the accuracy of each Debtor's Schedule G, inadvertent errors may have occurred. Certain information, such as the contact information of the counter-party, may not be included where such information could not be obtained using the Debtors' reasonable efforts. Listing or omitting a contract or agreement on Schedule G does not constitute an admission that such contract or agreement is or is not an executory contract or unexpired lease, was in effect on the Petition Date, or is valid or enforceable. Certain of the leases and contracts listed on Schedule G may contain certain renewal options, guarantees of payment, indemnifications, options to purchase, rights of first refusal, and other miscellaneous rights. Such rights, powers, duties, and obligations are not set forth separately on Schedule G.

Certain confidentiality and non-disclosure agreements may not be listed on Schedule G.

The Debtors are parties to numerous customer contracts. The Debtors have used their reasonable efforts, based upon their books and records, to provide a listing of the customer contracts on Schedule G. However, certain customer contracts may not be included where such information could not be obtained using the Debtors' reasonable efforts.

Certain of the contracts and agreements listed on Schedule G may consist of several parts, including, purchase orders, amendments, restatements, waivers, letters, and other documents that may not be listed on Schedule G or that may be listed as a single entry. In some cases, the same supplier or provider appears multiple times on Schedule G. This multiple listing is intended to reflect distinct agreements between the applicable Debtor and such supplier or provider. The Debtors expressly reserve their rights to challenge whether

such related materials constitute an executory contract, a single contract or agreement, or multiple, severable or separate contracts.

The contracts, agreements, and leases listed on Schedule G may have expired or may have been modified, amended, or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters, memoranda and other documents, instruments, and agreements that may not be listed therein despite the Debtors' use of reasonable efforts to identify such documents. Further, unless otherwise specified on Schedule G, each executory contract or unexpired lease listed thereon shall include all exhibits, schedules, riders, modifications, declarations, amendments, supplements, attachments, restatements, or other agreements made directly or indirectly by any agreement, instrument, or other document that in any manner affects such executory contract or unexpired lease, without respect to whether such agreement, instrument, or other document is listed thereon.

In addition, the Debtors may have entered into various other types of agreements in the ordinary course of their businesses, such as subordination, nondisturbance, and attornment agreements, supplemental agreements, settlement agreements, amendments/letter agreements, title agreements and confidentiality agreements. Such documents may not be set forth on Schedule G. Certain of the executory agreements may not have been memorialized and could be subject to dispute. Executory agreements that are oral in nature have not been included on the Schedule G.

The Debtors' reserve all of their rights, Claims and causes of action with respect to the contracts on Schedule G, including the right to dispute or challenge the characterization of the structure of any transaction or any document or instrument related to a creditors' Claims.

Omission of a contract or agreement from Schedule G does not constitute an admission that such omitted contract or agreement is not an executory contract or unexpired lease. The Debtors' rights under the Bankruptcy Code with respect to any such omitted contracts or agreements are not impaired by the omission. Schedule G may be amended at any time to add any omitted contract, agreement or lease.

The listing of any contract or agreement from Schedule G does not constitute an admission that such omitted contract or agreement is an executory contract or unexpired lease. The Debtors' rights under the Bankruptcy Code to dispute the effectiveness of any such contract or to amend Schedule G at any time to remove any contract, agreement or lease.

The Debtors maintain a variety of insurance policies, including, without limitation, workers' compensation, excess liability and general liability related policies. For purposes of Schedule G, all insurance policies are included however, multiple Debtors may be a party to or covered by the policies.

Schedule H. For purposes of Schedule H, the Debtors that are either the principal obligors or guarantors under the prepetition debt facilities are listed as Co-Debtors on Schedule H. The Debtors may not have identified certain guarantees associated with the Debtors' executory contracts, unexpired leases, secured financings, debt instruments, and other such agreements. The Debtors reserve all of their rights to amend the Schedules to the extent that additional guarantees are identified or such guarantees are discovered to have expired or be unenforceable.

In the ordinary course of their businesses, the Debtors may be involved in pending or threatened litigation. These matters may involve multiple plaintiffs and defendants, some or all of whom may assert cross-Claims and counter-Claims against other parties. Because the Debtors have treated all such Claims as contingent, disputed, or unliquidated, such Claims have not been set forth individually on Schedule H. Litigation matters can be found on each Debtor's Schedule E/F part 2 and Statement 7, as applicable.

Specific Disclosures with Respect to the Debtors' Statements

Statement 3. Statement 3 includes any disbursement or other transfer made by the Debtors within 90 days before the Petition Date except for those made to insiders (which payments appear in response to Statement question 4), employees, and bankruptcy professionals (which payments appear in Statement 11 and include any retainers paid to bankruptcy professionals). The amounts listed in Statement 3 reflect the Debtors' disbursements netted against any check level detail; thus, to the extent a disbursement was made to pay for multiple invoices, only one entry has been listed on Statement 3.

Statement 4. Statement 4 accounts for a respective Debtor's intercompany transactions, as well as other transfers to insiders as applicable. With respect to individuals, the amounts listed reflect the universe of payments and transfers to such individuals including compensation, bonus (if any), expense reimbursement, relocation reimbursement, and/or severance. Amounts paid on behalf of such employee for certain life and disability coverage, which coverage is provided to all of the Debtors' employees, has not been included.

In addition, the Debtors have included all consulting and payroll distributions and other expense reimbursements made over the twelve months preceding the Petition Date to any individual that may be deemed an "Insider."

Statement 5. Statement 5 excludes goods returned in the ordinary course of business.

Statement 7. Any information contained in Statement 7 shall not be a binding representation of the Debtors' liabilities with respect to any of the suits and proceedings identified therein. The Debtors receive, process and settle, primarily auto liability claims which are not subject to formal proceedings. To the extent these claims are not the subject of a formal proceeding, whether pending or concluded, these claims have not been listed in Statement 7. In addition to the sales tax audits disclosed on Statement 7, New York state has requested a sales tax audit and it is anticipated that additional audit requests will be received.

Statement 10. The Debtors occasionally incur losses for a variety of reasons, including theft and property damage. The Debtors, however, may not have records of all such losses if such losses do not have a material impact on the Debtors' businesses or are not reported for insurance purposes. The Debtors are self-insured for their auto and property casualty claims up to \$500,000.00 and treats these losses as part of its ordinary course of business. Accordingly, auto and property casualty losses are not disclosed on Statement 10.

Statement 11. Out of an abundance of caution, the Debtors have included payments to all professionals who have rendered any advice related the Debtors' bankruptcy proceedings in Statement 11. However, it is possible that the disclosed fees also relate to other, non-bankruptcy related services, and may include services rendered to other parties.

Statement 17. In addition to the disclosures listed on Statement 17, New England Motor Freight, Inc. is currently contributing to the Machinists Money Purchase Pension Plan, which is a defined contribution plan. This plan has not been listed on Statement 17 because New England Motor Freight, Inc. does not serve as plan administrator.

Statement 21. The Debtors have in their possession several trailers of freight that are either “Salvage” freight (property of the Debtors’ estates) or freight owned by third parties. The Debtors are sorting the freight and attempting to identify the contents as well as contact the rightful owners should the freight turn out to be customer property. Once the process is complete, the Debtors anticipate that the Salvage freight and any additional unclaimed freight will be disposed of via sale during the auction process or by abandonment.

Statement 26a. The Debtors have listed the beginning date of employment for its accountants and bookkeepers on a consolidated basis across all Debtor entities, irrespective of the formation date of the various Debtor entities.

Statement 26d. The Debtors have used their reasonable efforts to provide a listing of parties to which combined and consolidated financial statements have been provided. However, the Debtors provide numerous banks, vendors and customers with financial statements and the listing on Statement 26d may not be a complete listing of every party provided financial statements.

Statement 30. Unless otherwise indicated in a Debtor’s specific response to Statement 30, the Debtors have included a comprehensive response to Statement 30 in Statement 4.

Statement 32. The Debtors have only listed defined benefit plans on Statement 32. Defined contribution plans have been listed on Statement 17 to the extent that the Debtors are the plan administrator.

Fill in this information to identify the case:

Debtor name: New England Motor Freight, Inc.

United States Bankruptcy Court for the: District of New Jersey

Case number (if known): 19-12809

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from Schedule A/B	\$10,572,612.48
1b. Total personal property: Copy line 91A from Schedule A/B	\$149,704,213.82
1c. Total of all property: Copy line 92 from Schedule A/B	\$160,276,826.30

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$69,577,192.17
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F	\$272,877.11
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	+ \$56,576,943.76
4. Total liabilities Lines 2 + 3a + 3b	\$126,427,013.04

Fill in this information to identify the case:

Debtor name: New England Motor Freight, Inc.

United States Bankruptcy Court for the: District of New Jersey

Case number (if known): 19-12809

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.

☒ Yes. Fill in the information below

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest
--	------------------------------------

2. Cash on hand

2.1. WORKING FUNDS ELIZABETH	\$3,500.00
2.2. PETTY CASH-SOUTH PLAINFIELD	\$18.15
2.3. WORKING FUNDS PAWTUCKET	\$156.71
2.4. WORKING FUNDS BOSTON	\$300.00
2.5. WORKING FUNDS DISPATCH	\$700.00
2.6. PETTY CASH BALTIMORE	\$136.85
2.7. PETTY CASH ESSEX	\$293.36
2.8. PETTY CASH HAGERSTOWN	\$245.57
2.9. PETTY CASH - COLUMBUS	\$164.84
2.10. PETTY CASH - CLEVELAND	\$250.00
2.11. PETTY CASH - CINCINNATI	\$250.00
2.12. PETTY CASH - CHICAGO	\$300.00
2.13. PETTY CASH - RICHMOND	\$75.00
2.14. PETTY CASH - JOLIET	\$250.00
2.15. PETTY CASH-BUFFALO	\$274.61
2.16. PETTY CASH-SYRACUSE	\$200.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

2.17.	PETTY CASH-PHILADELPHIA	\$250.00
2.18.	PETTY CASH-PHILADELPHIA - SHOP	\$200.00
2.19.	PETTY CASH-BABYLON	\$250.00
2.20.	PETTY CASH- PORTLAND	\$200.00
2.21.	PETTY CASH-SPRINGFIELD	\$49.10
2.22.	PETTY CASH-NEWBURGH	\$400.00
2.23.	PETTY CASH- BURLINGTON	\$200.00
2.24.	PETTY CASH-NORTH HAVEN	\$119.50
2.25.	PETTY CASH-ROCHESTER	\$250.00
2.26.	PETTY CASH - JAMESTOWN	\$122.40
2.27.	PETTY CASH-OWEGO	\$160.42
2.28.	PETTY CASH-HARRISBURG	\$354.39
2.29.	PETTY CASH-SAFETY-HARRISBURG	\$300.00
2.30.	PETTY CASH-TOLEDO	\$250.00
2.31.	PETTY CASH INDIANA	\$250.00
2.32.	PETTY CASH - FORT WAYNE	\$250.00
2.33.	PETTY CASH-LEHIGHTON	\$200.00
2.34.	PETTY CASH-LEHIGHTON SHOP	\$500.00
2.35.	PETTY CASH - WILLIAMSPORT	\$135.50
2.36.	PETTY CASH-PITTSBURGH	\$679.36
2.37.	PETTY CASH-ALBANY	\$75.00
2.38.	PETTY CASH - CONCORD	\$222.82

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1.	BANK OF AMERICA MERRILL LYNCH PO BOX 15284 WILMINGTON DE 19850	OPERATING	2163	\$10,036.00
3.2.	BANK OF AMERICA MERRILL LYNCH PO BOX 15284 WILMINGTON DE 19850	OPERATING	0377	\$5,072.03
3.3.	CAPITAL ONE BANK PO BOX 57009 NEWARK NJ 07101-5709	OPERATING	5272	\$3,854.36
3.4.	CAPITAL ONE BANK PO BOX 57009 NEWARK NJ 07101-5709	OPERATING	5280	\$8,936.31
3.5.	EASTWEST BANK 9300 FLAIR DRIVE SUITE 106 EL MONTE CA 91731	OPERATING	5595	\$539.17
3.6.	JP MORGAN CHASE PO BOX 1820151 COLUMBUS OH 43218-2051	CHECKING	5162	\$1,144.70

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.7.	JP MORGAN CHASE PO BOX 1820151 COLUMBUS OH 43218-2051	OPERATING	6365	\$5,252,451.69
3.8.	JP MORGAN CHASE PO BOX 1820151 COLUMBUS OH 43218-2051	OPERATING	7555	\$51,797.00
3.9.	JP MORGAN CHASE 9300 FLAIR DRIVE SUITE 106 EL MONTE CA 91731	OPERATING	3180	\$19,473.69
3.10.	MANUFACTURERS AND TRADERS TRUST COMPANY PO BOX 22900 255 EAST AVENUE ROCHESTER NY 14692-9964	OPERATING	7542	\$1,952.53
3.11.	PEOPLE'S UNITED BANK NA 2 BURLINGTON SQUARE BURLINGTON VT 05401	OPERATING	0423	\$3,229.44
3.12.	PNC BANK ONE FINANCIAL PARKWAY LOCATOR Z1-YB42-03-1 KALAMAZOO MI 49009	OPERATING	8845	\$21,661.43
3.13.	SANTANDER PO BOX 841002 BOSTON MA 02284	OPERATING	2499	\$1,007.59
3.14.	SANTANDER PO BOX 841002 BOSTON MA 02284	OPERATING	9733	\$280.21
3.15.	T.D. CANADA TRUST NEMF-CANADA	OPERATING	1120	\$136,577.60
3.16.	T.D. CANADA TRUST NEMF-CANADA	OPERATING	9928	\$42,203.21
3.17. ¹	TD BANK NA PO BOX 1377 LEWISTON ME 04243-1377	NEW ENGLAND MOTOR FREIGHT INC 401 K	2465	\$142,465.67
3.18. ¹	TD BANK NA PO BOX 1377 LEWISTON ME 04243-1377	OPERATING	6143	\$139,006.48
3.19. ¹	TD BANK NA PO BOX 1377 LEWISTON ME 04243-1377	OPERATING	7939	\$2,692,253.95
3.20. ¹	TD BANK NA (COMMERCE) PO BOX 1377 LEWISTON ME 04243-1377	OPERATING	4274	\$11,523.25
3.21.	WELLS FARGO BANK NA PO BOX 63020 SAN FRANCISCO CA 94163	WELLS FARGO BANK-LOAN CLEARING	3019	\$43,828.69
3.22.	WELLS FARGO BANK NA PO BOX 63020 SAN FRANCISCO CA 94163	WELLS FARGO BANK-WIRE TRANSFER	9720	\$4,744.64
3.23.	CITIZENS BANK ROP 450 PO BOX 7000 PROVIDENCE RI 02940	OPERATING	6144	\$4,998.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

¹ACCOUNT FROZEN AS OF FILING DATE

4. Other cash equivalents (Identify all)

	Description	Name of institution	Type of account	Last 4 digits of account number	Current value of debtor's interest
4.1.					\$

5. Total of part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$8,611,571.22

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below

7. Deposits, including security deposits and utility deposits

	Description, including name of holder of deposit	Current value of debtor's interest
7.1.	SECURITY DEPOSIT 16503 HUNTERS GREEN	\$25,000.00
7.2.	UTILITY ALLEGHENY POWER/WEST PENN POWER	\$5,907.00
7.3.	WEST VIRGINIA UTILITIES APPALACHIAN POWER	\$762.00
7.4.	SECURITY DEPOSIT BALDWIN & LYONS, INC.	\$15,000.00
7.5.	PLPD ESCROW (ERNIE HARDY) BROADSPIRE	\$15,000.00
7.6.	UTILITY CITIZENS ENERGY	\$330.00
7.7.	SERVICE DEPOSIT COMDATA	\$25,000.00
7.8.	UTILITY DELMARVA ELECTRIC (LOC 43 BALTIMORE)	\$2,600.00
7.9.	INSURANCE DEPOSIT DELTA DENTAL	\$40,000.00
7.10.	INSURANCE DEPOSIT GALLAGHER BASSETT	\$476,000.00
7.11.	UTILITY INDIANA MICHIGAN POWER	\$256.00
7.12.	SECURITY DEPOSIT INDIANAPOLIS LEASE	\$6,500.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

7. Deposits, including security deposits and utility deposits

	Description, including name of holder of deposit	Current value of debtor's interest
7.13.	ESCROW DEPOSIT LIBERTY	\$200,000.00
7.14.	LOCATION #32-CINCINNATI OH MERIDIAN INVESTMENTS	\$7,000.00
7.15.	LOCATION # 07 - FORT WAYNE IN NIPSCO	\$565.00
7.16.	WEST VIRGINIA RENT PCG	\$3,200.00
7.17.	OFFICE SPACE RENTAL-MPS QUEST WORKSPACES	\$3,000.00
7.18.	RENT DEPOSIT RLF IA SPE LLC	\$14,450.00
7.19.	UTILITY SUFFOLK COUNTY WATER	\$300.00
7.20.	SECURITY SERVICE DEPOSIT THE ELECTRIC GUARD DOG	\$1,350.00
7.21.	ESCROW TRAVELERS	\$10,000.00
7.22.	INSURANCE DEPOSIT UNITED HEALTHCARE	\$915,000.00

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

	Description, including name of holder of prepayment	Current value of debtor's interest
8.1.	PREPAID LICENSES & TAXES ALCOHOLIC BEVERAGES	\$150.00
8.2.	PREPAID INSURANCE ALLIANZ	\$58,285.13
8.3.	PREPAID INSURANCE AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA	\$16,804.00
8.4.	MISCELLANEOUS PREPAYMENTS AUDI OF FREEHOLD	\$7,573.96
8.5.	PREPAID PROPERTY TAXES BALTIMORE C OUNTY DIRECTOR OF FINANCE	\$3,034.56
8.6.	PREPAID PROPERTY TAXES BALTIMORE COUNTY	\$8,209.32
8.7.	PREPAID PROPERTY TAXES BALTIMORE COUNTY	\$2,095.41

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment		Current value of debtor's interest
8.8.	PREPAID TOLLS BESTPASS	\$96,774.56
8.9.	PREPAID PROPERTY TAXES BOROUGH OF SOUTH PLAINFIELD	\$8,073.29
8.10.	PREPAID PROPERTY TAXES CALEAST NAT, LLC	\$6,510.15
8.11.	MISCELLANEOUS PREPAYMENTS CENVEO CORPORATION	\$774.88
8.12.	PREPAID PROPERTY TAXES CITY OF PAWTUCKET, R.I.	\$389.85
8.13.	PREPAID PROPERTY TAXES CITY OF PAWTUCKET, R.I.	\$789.61
8.14.	PREPAID PROPERTY TAXES CITY OF PAWTUCKET, R.I.	\$1,201.55
8.15.	PREPAID PROPERTY TAXES CITY OF PAWTUCKET, R.I.	\$10,602.19
8.16.	PREPAID PROPERTY TAXES CITY OF PAWTUCKET, R.I.	\$2,124.42
8.17.	PREPAID PROPERTY TAXES CITY OF PAWTUCKET, R.I.	\$1,267.90
8.18.	PREPAID PROPERTY TAXES CITY OF PAWTUCKET, R.I.	\$1,365.23
8.19.	PREPAID INCOME TAX CITY OF SHARONVILLE OHIO	\$1,000.00
8.20.	PREPAID PROPERTY TAXES CITY OF CONCORD	\$11,710.15
8.21.	PREPAID PROPERTY TAXES CITY TREASURER ROCHESTER	\$2,757.93
8.22.	PREPAID PROPERTY TAXES CITY TREASURER ROCHESTER	\$569.22
8.23.	MISCELLANEOUS PREPAYMENTS CLEO COMMUNICATIONS	\$8,462.64
8.24.	MISCELLANEOUS PREPAYMENTS CMF	\$5,730.77
8.25.	PREPAID PROPERTY TAXES COMMERCE CENTER I	\$72,831.16
8.26.	PREPAID PROPERTY TAXES COMMERCE CENTER II	\$3,585.70

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

	Description, including name of holder of prepayment	Current value of debtor's interest
8.27.	PREPAID LICENSES & TAXES COMMONWEALTH OF PENNSYLVANIA	\$25.50
8.28.	PREPAID PROPERTY TAXES COUNTY OF CARBON	\$16,774.30
8.29.	PREPAID INSURANCE CRC GROUP	\$109,374.00
8.30.	MISCELLANEOUS PREPAYMENTS CRYSTAL INFOSYSTEMS	\$1,415.38
8.31.	PREPAID SERVICE DONLIN RECANO & COMPANY	\$10,088.50
8.32.	PREPAID BANK & LENDING FEES EAST WEST BANK	\$9,283.57
8.33.	PREPAID INSURANCE ENDURANCE AMERICAN	\$99,421.88
8.34.	PREPAID INSURANCE EVANSTON INSUANCE CO	\$16,078.13
8.35.	PREPAID PROPERTY TAXES FALCONER CENTRAL SCHOOL	\$2,096.56
8.36.	PREPAID PROPERTY TAXES FALCONER CENTRAL SCHOOL	\$121.97
8.37.	PREPAID PROPERTY TAXES FRANKLIN COUNTY TREASURER	\$21,766.35
8.38.	MISCELLANEOUS PREPAYMENTS FREIGHTSNAP LLC	\$5,278.85
8.39.	PREPAID SERVICE GIBBONS P.C.	\$180,000.00
8.40.	PREPAID TRUCK PARTS GRAPHIC IMPRESSIONS	\$47,752.38
8.41.	PREPAID INSURANCE GREAT AMERICAN	\$17,192.50
8.42.	MISCELLANEOUS PREPAYMENTS HARMONY PRINTING	\$4,676.10
8.43.	PREPAID INSURANCE HARTFORD	\$25,133.54
8.44.	PREPAID INSURANCE HARTFORD FIRE INSURANCE COMPANY	\$2,684.00
8.45.	PREPAID STATE INCOME TAX ILLINOIS DEPARTMENT OF REVENUE	\$1,000.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

	Description, including name of holder of prepayment	Current value of debtor's interest
8.46.	PREPAID INSURANCE ILLINOIS UNION	\$38,828.13
8.47.	PREPAID TRUCK PARTS IMAGE FLEET GRAPHICS	\$756.92
8.48.	MISCELLANEOUS PREPAYMENTS INFOR GLOBAL SOLUTIO	\$10,693.24
8.49.	MISCELLANEOUS PREPAYMENTS INTEGRATED COMMUNICATIONS	\$4,126.15
8.50.	PREPAID FEDERAL HEAVY VEHICLE USE TAX - 2290 INTERNAL REVENUE SERVICE	\$207,885.83
8.51.	MISCELLANEOUS PREPAYMENTS ITSIMPLIFY	\$13,892.34
8.52.	PREPAID PROPERTY TAXES JORDAN ELBRIDGE TAX	\$1,866.43
8.53.	MISCELLANEOUS PREPAYMENTS KMS CONSULTING SERVICES	\$45,853.37
8.54.	PREPAID INSURANCE KORE INSURANCE	\$89,595.00
8.55.	PREPAID INSURANCE LIBERTY INSURANCE	\$31,437.50
8.56.	PREPAID INSURANCE LLOYDS	\$6,015.63
8.57.	PREPAID INSURANCE LOCTON	\$87,741.00
8.58.	PREPAID PROPERTY TAXES LOWER ALLEN TOWNSHIP	\$23,885.96
8.59.	PREPAID PROPERTY TAXES LOWER ALLEN TOWNSHIP	\$3,778.97
8.60.	PREPAID LICENSES & TAXES MAINE BUREAU OF MV	\$28.12
8.61.	PREPAID LICENSES & TAXES MARYLAND COMPTROLLER	\$447.12
8.62.	PREPAID STATE INCOME TAX MASSACHUSETTS	\$544.00
8.63.	PREPAID PROPERTY TAXES MERIDEN TAX COLLECTOR	\$15,439.49
8.64.	PREPAID PROPERTY TAXES MERIDEN TAX COLLECTOR	\$1,467.76

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

	Description, including name of holder of prepayment	Current value of debtor's interest
8.65.	MISCELLANEOUS PREPAYMENTS MIDRANGE SOLUTIONS	\$7,211.08
8.66.	PREPAID PROPERTY TAXES MILTON AREA SCHOOL	\$1,831.14
8.67.	PREPAID INSURANCE MJ FISH	\$9,232.00
8.68.	PREPAID TOLLS MMTA	\$2,869.88
8.69.	PREPAID LICENSES & TAXES MMTA SERVICES	\$174,729.63
8.70.	PREPAID LICENSES & TAXES MMTA SERVICES, INC	\$16,760.38
8.71.	PREPAID PROPERTY TAXES MONROE COUNTY TREASURER	\$4,113.69
8.72.	PREPAID PROPERTY TAXES MTJOY DONEGAL SCHOOL	\$7,507.92
8.73.	PREPAID INSURANCE NATIONAL FIRE&MARINE	\$159,075.00
8.74.	PREPAID INSURANCE NATIONAL SURETY	\$11,526.67
8.75.	MISCELLANEOUS PREPAYMENTS NEO POST	\$85.31
8.76.	PREPAID STATE INCOME TAX NEW HAMPSHIRE DIVISION OF REVENUE ADMINISTRATION	\$27,841.00
8.77.	PREPAID STATE INCOME TAX NEW JERSEY DIVISION OF TAXATION	\$2,000.00
8.78.	PREPAID STATE INCOME TAX NEW JERSEY DIVISION OF TAXATION	\$211.00
8.79.	PREPAID PROPERTY TAXES NEW WINDSOR NEWBURGH(ENLARGED DIST)	\$4,214.64
8.80.	PREPAID STATE INCOME TAX NEW YORK CITY DEPARTMENT OF FINANCE	\$2,250.00
8.81.	PREPAID STATE INCOME TAX NEW YORK STATE DEPARTMENT OF TAX AND FINANCE	\$5,625.00
8.82.	PREPAID LICENSES & TAXES NJ MVC	\$825,194.36
8.83.	PREPAID LICENSES & TAXES NJ MVC-SPECIAL SERV TITLES (372)	\$44,564.77

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

	Description, including name of holder of prepayment	Current value of debtor's interest
8.84.	PREPAID PROPERTY TAXES OWEGO APPALACHIN SCHOOLS	\$1,027.33
8.85.	MISCELLANEOUS PREPAYMENTS PCM SALES, INC.	\$1,269.23
8.86.	MISCELLANEOUS PREPAYMENTS PEGASUS TRANSTECH	\$18,493.60
8.87.	PREPAID SERVICE PHOENIX MANAGEMENT SERVICES LLC	\$250,000.00
8.88.	PREPAID TRUCK PARTS PINNACLE FLEET SOLUTIONS	\$4,510.24
8.89.	PREPAID INSURANCE RLI INSURANCE CO	\$956.25
8.90.	PREPAID PROPERTY TAXES ROANOKE	\$2,122.59
8.91.	MISCELLANEOUS PREPAYMENTS ROCKET SOFTWARE	\$8,900.24
8.92.	MISCELLANEOUS PREPAYMENTS RR DONNELLEY	\$3,807.31
8.93.	PREPAID BANK & LENDING FEES SANTANDER	\$6,894.70
8.94.	MISCELLANEOUS PREPAYMENTS SMARTDRIVE SYSTEMS	\$321.23
8.95.	MISCELLANEOUS PREPAYMENTS SMC	\$12,403.85
8.96.	MISCELLANEOUS PREPAYMENTS SPORTS TICKETS	\$10,770.34
8.97.	PREPAID INSURANCE ST.PAUL FIRE&MARINE	\$1,687.50
8.98.	MISCELLANEOUS PREPAYMENTS STARNET SOLUTIONS	\$3,108.00
8.99.	PREPAID STATE INCOME TAX STATE OF CONNECTICUT, COMMISSIONER OF REVENUE SERVICES	\$15,000.00
8.100.	PREPAID LICENSES & TAXES STATE OF WEST VIRGINIA	\$9.81
8.101.	PREPAID PROPERTY TAXES SUPERVISOR, TOWN OF MONTGOMERY	\$46,886.04
8.102.	PREPAID PROPERTY TAXES SUPERVISORE TOWN OF MONTGOMERY	\$46,679.37

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment		Current value of debtor's interest
8.103.	PREPAID PROPERTY TAXES TAX COLLECTOR-TOWN OF N.HAVEN	\$6,995.51
8.104.	PREPAID BANK & LENDING FEES TD BANK	\$55,174.96
8.105.	PREPAID PROPERTY TAXES TONAWANDA TOWN CLERK	\$29,224.53
8.106.	PREPAID PROPERTY TAXES TONAWANDA TOWNSHIP	\$12,941.98
8.107.	MISCELLANEOUS PREPAYMENTS TOWER PAPER	\$776.92
8.108.	PREPAID PROPERTY TAXES TOWN OF BABYLON	\$22,706.74
8.109.	PREPAID PROPERTY TAXES TOWN OF BABYLON	\$13,696.79
8.110.	PREPAID PROPERTY TAXES TOWN OF BILLERICA	\$8,330.73
8.111.	PREPAID PROPERTY TAXES TOWN OF CICERO	\$10,410.18
8.112.	PREPAID PROPERTY TAXES TOWN OF CICERO TAX COLLECTOR	\$11,904.65
8.113.	PREPAID PROPERTY TAXES TOWN OF COLONIE TAX COLLECTOR	\$3,132.19
8.114.	PREPAID PROPERTY TAXES TOWN OF COLONIE TAX COLLECTOR	\$3,463.36
8.115.	PREPAID PROPERTY TAXES TOWN OF COLONIE TAX COLLECTOR	\$6,160.31
8.116.	PREPAID PROPERTY TAXES TOWN OF COLONIE TAX COLLECTOR	\$6,441.72
8.117.	PREPAID PROPERTY TAXES TOWN OF COLONIE TAX COLLECTOR	\$3,277.37
8.118.	PREPAID PROPERTY TAXES TOWN OF COLONIE TAX COLLECTOR	\$3,251.89
8.119.	PREPAID PROPERTY TAXES TOWN OF DEWITT	\$2,294.52
8.120.	PREPAID PROPERTY TAXES TOWN OF DEWITT TAX COLLECTOR	\$2,918.95
8.121.	PREPAID PROPERTY TAXES TOWN OF ELBRIDGE TAX COLLECTOR	\$2,094.47

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment		Current value of debtor's interest
8.122.	PREPAID PROPERTY TAXES TOWN OF ELLICOTT	\$219.47
8.123.	PREPAID PROPERTY TAXES TOWN OF ELLICOTT	\$3,772.78
8.124.	PREPAID PROPERTY TAXES TOWN OF NEW WINDSOR	\$5,004.26
8.125.	PREPAID PROPERTY TAXES TOWN OF NORTH READING	\$338.98
8.126.	PREPAID PROPERTY TAXES TOWN OF NORTH READING	\$5,118.93
8.127.	PREPAID PROPERTY TAXES TOWN OF OWEGO	\$1,527.48
8.128.	PREPAID PROPERTY TAXES TOWN OF OYSTER BAY	\$68,222.25
8.129.	PREPAID PROPERTY TAXES TOWN OF OYSTER BAY	\$15,798.74
8.130.	PREPAID PROPERTY TAXES TOWN OF OYSTER BAY	\$16,394.51
8.131.	PREPAID PROPERTY TAXES TOWN OF OYSTER BAY	\$844.24
8.132.	PREPAID PROPERTY TAXES TOWN OF OYSTER BAY	\$91.60
8.133.	PREPAID PROPERTY TAXES TOWN OF PENNSAUKEN	\$656.10
8.134.	PREPAID PROPERTY TAXES TOWN OF PENNSAUKEN	\$656.10
8.135.	PREPAID PROPERTY TAXES TOWN OF PENNSAUKEN	\$10,633.92
8.136.	PREPAID PROPERTY TAXES TOWN OF PENNSAUKEN	\$5,821.03
8.137.	PREPAID PROPERTY TAXES TOWN OF SCARBOROUGH	\$12,350.19
8.138.	PREPAID PROPERTY TAXES TOWN OF SCARBOROUGH	\$7,176.81
8.139.	PREPAID PROPERTY TAXES TOWN OF WEST SPRINGFIELD	\$627.37
8.140.	PREPAID PROPERTY TAXES TOWN OF WEST SPRINGFIELD	\$7,342.68

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment	Current value of debtor's interest
8.141. PREPAID PROPERTY TAXES TOWN OF WILLISTON	\$10,826.52
8.142. PREPAID PROPERTY TAXES TOWNSHIP OF NORTH HUNTINGTON	\$9,978.94
8.143. PREPAID PROPERTY TAXES TREASURER OF LUCAS COUNTY	\$8,001.34
8.144. PREPAID INSURANCE TRUMBULL INSURANCE	\$492,512.71
8.145. MISCELLANEOUS PREPAYMENTS UIC, INC	\$71,042.31
8.146. MISCELLANEOUS PREPAYMENTS UNITED PACKAGING	\$4,203.69
8.147. MISCELLANEOUS PREPAYMENTS V.A.G. INC. (FUEL ADDITIVE)	\$21,843.12
8.148. PREPAID STATE INCOME TAX VERMONT DEPARTMENT OF TAXES	\$750.00
8.149. MISCELLANEOUS PREPAYMENTS W.B. MASON - PAPER	\$15,965.05
8.150. PREPAID PROPERTY TAXES WARRIOR RUN SCHOOL	\$5,221.15
8.151. PREPAID STATE INCOME TAX WEST VIRGINIA STATE TAX DEPARTMENT	\$500.00

9. Total of part 2

Add lines 7 through 8. Copy the total to line 81.

\$6,004,671.19

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

	Face amount	Doubtful or uncollectible accounts		
11a. 90 days old or less:	\$33,387,063.71	\$0.00	= →	\$33,387,063.71
	Face amount	Doubtful or uncollectible accounts		
11b. Over 90 days old:	\$1,847,111.55	\$0.00	= →	\$1,847,111.55

Debtor **New England Motor Freight, Inc.**

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12. Total of part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$35,234,175.26

Part 4: Investments

13. Does the debtor own any investments?

☐ No. Go to Part 5.

☒ Yes. Fill in the information below.

Valuation method used
for current value

Current value of
debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock

14.1. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity

% of ownership

15.1. HOLLYWOOD AVENUE SOLAR, LLC 100.00% _____ UNDETERMINED

15.2. MYJON, LLC 100.00% _____ UNDETERMINED

15.3. UNITED EXPRESS SOLAR, LLC 100.00% _____ UNDETERMINED

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe

16.1. _____ \$ _____

17. Total of part 4

Add lines 14 through 16. Copy the total to line 83.

UNDETERMINED

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

☐ No. Go to Part 6.

☒ Yes. Fill in the information below.

General description

Date of the last
physical inventory

Net book value of
debtor's interest
(Where available)

Valuation method used
for current value

Current value of
debtor's interest

19. Raw materials

19.1. _____ \$ _____

20. Work in progress

20.1. _____ \$ _____

21. Finished goods, including goods held for resale

21.1. _____ \$ _____

22. Other inventory or supplies

General description

Date of the last physical
inventory

Net book value of
debtor's interest

Valuation method used
for current value

Current value of
debtor's interest

22.1. PARTS & TIRES INVENTORY 1/5/2019 \$1,797,888.00 AVERAGE COST \$1,797,888.00

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****22. Other inventory or supplies**

General description	Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
22.2. FUEL INVENTORY	1/5/2019	\$645,673.03	AVERAGE COST	\$645,673.03

23. Total of part 5

Add lines 19 through 22. Copy the total to line 84.

\$2,443,561.03

24. Is any of the property listed in Part 5 perishable?☒ No☐ Yes**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**☐ No☒ Yes Book value: \$703,445.36 Valuation method: AVERAGE COST Current value: \$703,445.36**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?**☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**☒ No. Go to Part 7.☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
28.1. _____	\$ _____	_____	\$ _____
29. Farm animals. Examples: Livestock, poultry, farm-raised fish			
29.1. _____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
30.1. _____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
31.1. _____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
32.1. _____	\$ _____	_____	\$ _____
33. Total of part 6			\$0.00

Add lines 28 through 32. Copy the total to line 85.

34. Is the debtor a member of an agricultural cooperative?☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes Book value: \$_____ Valuation method: _____ Current value: \$_____**36. Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
39.1. OWNED	\$204,455.44	Net Book Value	\$204,455.44
40. Office fixtures			
40.1. SEE RESPONSE AT PART 7 NO. 39	\$_____	_____	\$_____
41. Office equipment, including all computer equipment and communication systems equipment and software			
	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
41.1. SEE RESPONSE AT PART 7 NO. 39	\$_____	_____	\$_____
42. Collectibles. Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1. _____	\$_____	_____	\$_____
43. Total of part 7			
Add lines 39 through 42. Copy the total to line 86.			\$204,455.44

44. Is a depreciation schedule available for any of the property listed in Part 7?☐ No☒ Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available) (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. SEE RESPONSE AT PART 8, NO. 50 FOR ACCOUNTING OF "SERVICE CARS & EQUIPMENT"	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories. Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1. _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1. _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
50.1. REVENUE EQUIPMENT	\$69,924,302.99	Net Book Value	\$69,924,302.99
50.2. SERVICE CARS & EQUIPMENT	\$789,741.66	Net Book Value	\$789,741.66
50.3. MISCELLANEOUS EQUIPMENT	\$5,695,517.30	Net Book Value	\$5,695,517.30
50.4. UNAMORTIZED COMPUTER PROGRAMS	\$1,707,705.87	Net Book Value	\$1,707,705.87
50.5. BUILDINGS & EQUIPMENT - MIAMI	\$185,720.79	NET Book Value	\$185,720.79
51. Total of part 8 Add lines 47 through 50. Copy the total to line 87.			\$78,302,988.61

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.	Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
55.1.	ALBANY TERMINAL # 56 4315 ALBANY STREET COLONIE NY 12205	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.2.	ALLENTOWN TERMINAL # 68 457 MAHONING DRIVE LEHIGHTON PA 18235	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.3.	BALTIMORE /WASHINGTON TERMINAL # 40 1508 JOHN AVE BALTIMORE MD 21227	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.4.	BETHPAGE TERMINAL # 14 1 IMPERATORE DRIVE OLD BETHPAGE NY 11804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.5.	BINGHAMTON TERMINAL # 53 91 SULFUR SPRINGS ROAD OWEGO NY 13827	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.6.	BOSTON TERMINAL # 03 90 CONCORD STREET NO. READING MA 01864	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.7.	BUFFALO TERMINAL # 58 410 GRAND ISLAND BLVD. TONAWANDA NY 14150	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.8.	BURLINGTON TERMINAL # 17 1087 AVE. D EXTENSION WILLISTON VT 05495	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.	Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
55.9.	CHARLESTON TERMINAL # 04 500 RIVER EAST DRIVE BELLE WV 25015	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.10.	CHICAGO TERMINAL # 37 2300 LANDMEIER RD. ELK GROVE VILLAGE IL 60007	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.11.	CINCINNATI TERMINAL # 32 2500 COMMERCE BLVD CINCINNATI OH 45241	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.12.	CLEVELAND TERMINAL # 33 3024 BRECKSVILLE RD.-SUITE A RICHFIELD OH 44286	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.13.	COLUMBUS TERMINAL # 31 1700 GEORGESVILLE RD. COLUMBUS OH 43228	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.14.	CONCORD TERMINAL # 20 118 HALL STREET CONCORD NH 03301	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.15.	ELIZABETH TERMINAL # 01 1-71 NORTH AVENUE EAST ELIZABETH NJ 07201	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.16.	ELKTON TERMINAL # 43 3 CENTER DRIVE NORTHEAST MD 21901	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest					
55.17.	ERIE TERMINAL # 57 2550 S. WORK STREET FALCONER NY 14733	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.18.	FORT WAYNE TERMINAL # 07 2532 BREMER RD FORT WAYNE IN 46803	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.19.	HAGERSTOWN TERMINAL # 47 16503 HUNTERS GREEN PARKWAY HAGERSTOWN MD 21740	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.20.	HARRISBURG TERMINAL # 70 2800 APPLETON STREET CAMP HILL PA 17011	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.21.	INDIANAPOLIS TERMINAL # 42 1702 SOUTH BELMONT AVENUE INDIANAPOLIS IN 46221	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.22.	JOLIET TERMINAL # 39 23348 WEST EAMES STREET CHANNAHON IL 60410	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.23.	LEASEHOLD IMPROVEMENTS - IN PROGRESS	LEASEHOLD INTEREST	\$1,141,138.93	Book Value	\$1,141,138.93
55.24.	MERIDEN TERMINAL # 16 475 RESEARCH PARKWAY MERIDEN CT 06450	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.	Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
55.25.	30-2133-008-0010 MIAMI, FLORIDA REAL PROPERTY AND IMPROVEMENTS 11700 NW 36TH AVENUE HIALEAH FL 33167	FEE SIMPLE INTEREST	\$226,316.00	Net Book Value	\$226,316.00
55.26.	30-2133-008-0010 MIAMI, FLORIDA YARD IMPROVEMENTS - MIAMI 11700 NW 36TH AVENUE HIALEAH FL 33167	FEE SIMPLE INTEREST	UNDETERMINED	Net Book Value	UNDETERMINED
55.27.	_____ NEMF CARGO CLAIMS DEPT 212 BLACK HORSE LANE N. BRUNSWICK NJ 08902	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.28.	_____ NEMF CORPORATE CUST. SRV. 457 MAHONING DRIVE LEHIGHTON PA 18235	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.29.	_____ NEMF CREDIT & COLLECTION DEPT LOCATION # 90 5302 WHEELER ROAD JORDAN NY 13080	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.30.	_____ NEMF HUMAN RESOURCES DEPT. 212 BLACKHORSE LANE N.BRUNSWICK NJ 08902	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.31.	_____ NEMF PROPERTIES, CONSTRUCTION & ENVIRONMENTAL DEPT 141 EAST 26TH STREET ERIE PA 16504	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.32.	_____ NEWBURGH TERMINAL # 52 194 NEELYTOWN ROAD MONTGOMERY NY 12549	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest					
55.33.	PHILADELPHIA TERMINAL # 60 1618 UNION AVENUE PENNSAUKEN NJ 08110	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.34.	PITTSBURGH TERMINAL # 65 12731 ROUTE 30 WEST IRWIN PA 15642	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.35.	PLAINFIELD TERMINAL # 12 310 HOLLYWOOD AVENUE SO. PLAINFIELD NJ 07080	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.36.	PORTLAND TERMINAL # 18 7 MANSON LIBBY ROAD SCARBOROUGH ME 04074	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.37.	PROVIDENCE TERMINAL # 02 (LOT 0337) 400 DIVISION STREET PAWTUCKET RI 02860	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.38.	PUERTO RICO TERMINAL # 88 CENTRO MERCANTIL INTERNACIONAL EDIF. #5 LOCAL #1 SECTOR PUEBLO VIEJO, BO. AMELIA GUAYNABO PR 00966	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.39.	REAL PROPERTY LEASEHOLD IMPROVEMENTS	LEASEHOLD INTEREST	\$9,205,157.55	Net Book Value	\$9,205,157.55
55.40.	RICHMOND TERMINAL # 38 6110 JEFFERSON DAVIS HIGHWAY RICHMOND VA 23234	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
55.41. _____ ROANOKE TERMINAL # 44 _____ 1919 PLANTATION ROAD NE ROANOKE VA 24012	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.42. _____ ROCHESTER TERMINAL # 51 _____ 50 LOUISE STREET ROCHESTER NY 14606	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.43. _____ SPRINGFIELD TERMINAL # 08 _____ 1311 UNION STREET W. SPRINGFIELD MA 01089	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.44. _____ SYRACUSE TERMINAL # 55 _____ 7201 SCHUYLER ROAD E. SYRACUSE NY 13057	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.45. _____ TOLEDO TERMINAL # 34 _____ 1260 MATZINGER RD TOLEDO OH 43612-3849	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.46. _____ WILLIAMSPORT TERMINAL # 62 _____ 110 SODOM ROAD MILTON PA 17847	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.47. _____ REAL PROPERTY LEASE _____ 15 MIDDLETOWN AVE NORTH HAVEN CT 06473	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.48. _____ REAL PROPERTY LEASE _____ 515 NORTH FLAGLER DR SUITE P 300 WEST PALM BEACH FL 33401	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest					
55.49.	REAL PROPERTY LEASE 3 CENTER DRIVE NORTHEAST MD 21901-2406	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.50.	REAL PROPERTY LEASE 34 PERRY ROAD BANGOR ME 04401	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.51.	REAL PROPERTY LEASE 38 OLD KARNER ROAD COLONIE NY 12205	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.52.	REAL PROPERTY LEASE 159 EADS ST WEST BABYLON NY 11704	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.53.	REAL PROPERTY LEASE 68-67 SCHUYLER ROAD DEWITT NY 13457	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.54.	REAL PROPERTY LEASE 2875 APPLETON ST TOWNSHIP OF DELAWARE CAMP HILL PA 17011	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.55.	REAL PROPERTY LEASE RD #1 TOWNSHIP OF DELAWARE WATSONTOWN PA 17777	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.56.	PROVIDENCE TERMINAL # 02 (LOT 0705) 466 DIVISION STREET PAWTUCKET RI 02860	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

55.57. _____ PROVIDENCE TERMINAL # 02 (LOT 0344) 55 DELTA DRIVE PAWTUCKET RI 02680	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.58. _____ PROVIDENCE TERMINAL # 02 345 WALCOTT ST PAWTUCKET RI 02680	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED
55.59. _____ PROVIDENCE TERMINAL # 02 51 DELTA DRIVE PAWTUCKET RI 02860	LEASEHOLD INTEREST	UNDETERMINED	_____	UNDETERMINED

56. Total of part 9

Add the current value on lines 55. Copy the total to line 88.

\$10,572,612.48

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
☒ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. Patents, copyrights, trademarks, and trade secrets

60.1. SERVICE MARK - "NEMF" REGISTRATION NO. 2069423	\$0.00	_____	UNDETERMINED
60.2. SERVICE MARK - "EXCELLENCE IN MOTION" REGISTRATION NO. 2078935	\$0.00	_____	UNDETERMINED
60.3. SERVICE MARK - "SHEVELL GROUP" REGISTRATION NO. 3251306	\$0.00	_____	UNDETERMINED
60.4. SERVICE MARK - "APEX LOGISTICS" REGISTRATION NO. 3257668	\$0.00	_____	UNDETERMINED
60.5. SERVICE MARK - "YOU MATTER TO US" REGISTRATION NO. 4349723	\$0.00	_____	UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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60.6. ¹	SERVICE MARK - "PHOENIX" SERIAL NO. 75826636	\$0.00	_____	UNDETERMINED
60.7. ²	SERVICE MARK - "FLAWLESS EXECUTION" SERIAL NO. 76198959	\$0.00	_____	UNDETERMINED

¹ABANDONED SEPTEMBER 30, 2000

²ABANDONED MAY 14, 2002

61. Internet domain names and websites

	Net book value of debtor's interest	Valuation method	Current value of debtor's interest
61.1. EASTERNFREIGHTWAYS.NET	UNDETERMINED	_____	UNDETERMINED
61.2. APEXLOGISTICSINC.COM	UNDETERMINED	_____	UNDETERMINED
61.3. BESTFLATBED.COM	UNDETERMINED	_____	UNDETERMINED
61.4. CARRIERINDUSTRIES.COM	UNDETERMINED	_____	UNDETERMINED
61.5. CARRIERINDUSTRIES.INFO	UNDETERMINED	_____	UNDETERMINED
61.6. CARRIERINDUSTRIES.NET	UNDETERMINED	_____	UNDETERMINED
61.7. EASTERNFREIGHTWAYS.COM	UNDETERMINED	_____	UNDETERMINED
61.8. EASTERNONTHEBALL.COM	UNDETERMINED	_____	UNDETERMINED
61.9. EFWFLATBED.COM	UNDETERMINED	_____	UNDETERMINED
61.10. EXCELLENCEINMOTION.COM	UNDETERMINED	_____	UNDETERMINED
61.11. HTTP://WWW.NEMF.COM	UNDETERMINED	_____	UNDETERMINED
61.12. NEMF.COM	UNDETERMINED	_____	UNDETERMINED
61.13. NEMF.NET	UNDETERMINED	_____	UNDETERMINED
61.14. NEMFLOGISTICS.COM	UNDETERMINED	_____	UNDETERMINED
61.15. NEMFLOGISTICS.NET	UNDETERMINED	_____	UNDETERMINED
61.16. NEMFWT.COM	UNDETERMINED	_____	UNDETERMINED
61.17. NEWENGLANDMOTORFREIGHT.COM	UNDETERMINED	_____	UNDETERMINED
61.18. NEWENGLANDWORLDTRANSPORT.COM	UNDETERMINED	_____	UNDETERMINED
61.19. NJWAREHOUSE.NET	UNDETERMINED	_____	UNDETERMINED
61.20. PHOENIXMOTOREXPRESS.COM	UNDETERMINED	_____	UNDETERMINED
61.21. PHOENIXMOTOREXPRESS.INFO	UNDETERMINED	_____	UNDETERMINED
61.22. PICKEFW.COM	UNDETERMINED	_____	UNDETERMINED
61.23. SHEVELL.COM	UNDETERMINED	_____	UNDETERMINED
61.24. SHEVELLGROUP.COM	UNDETERMINED	_____	UNDETERMINED
61.25. SHEVELLGROUP.NET	UNDETERMINED	_____	UNDETERMINED
61.26. SHEVELLGROUPLOGISTICS.COM	UNDETERMINED	_____	UNDETERMINED
61.27. SHEVELLGROUPLOGISTICS.NET	UNDETERMINED	_____	UNDETERMINED
61.28. SHEVELLLOGISTICS.COM	UNDETERMINED	_____	UNDETERMINED
61.29. SHEVELLLOGISTICS.NET	UNDETERMINED	_____	UNDETERMINED
61.30. SHEVELLTRANSPORTATIONGROUP.COM	UNDETERMINED	_____	UNDETERMINED
61.31. THESHEVELLGROUP.COM	UNDETERMINED	_____	UNDETERMINED
61.32. THESHEVELLGROUP.NET	UNDETERMINED	_____	UNDETERMINED

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****61. Internet domain names and websites**

		Net book value of debtor's interest	Valuation method	Current value of debtor's interest
61.33.	UNITEDEXPRESSLINES.COM	UNDETERMINED	_____	UNDETERMINED
61.34.	WE-CARE-ABOUT-YOU.COM	UNDETERMINED	_____	UNDETERMINED
61.35.	WE-CARE-ABOUT-YOU.NET	UNDETERMINED	_____	UNDETERMINED
61.36.	YOU-MATTER-TO-US.COM	UNDETERMINED	_____	UNDETERMINED
61.37.	YOUMATTERTOUS.NET	UNDETERMINED	_____	UNDETERMINED
61.38.	YOU-MATTER-TO-US.NET	UNDETERMINED	_____	UNDETERMINED

62. Licenses, franchises, and royalties

62.1.	ALABAMA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.2.	ALASKA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.3.	ARKANSAS FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.4.	CALIFORNIA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.5.	COLORADO FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.6.	GEORGIA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.7.	HAWAII FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.8.	IDAHO FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.9.	IOWA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.10.	KANSAS FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.11.	KENTUCKY FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.12.	LOUISIANA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.13.	MINNESOTA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED
62.14.	MISSISSIPPI FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	_____	UNDETERMINED

Debtor	New England Motor Freight, Inc.		Case number (if known) 19-12809
62.15.	MONTANA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.16.	NEBRASKA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.17.	NEVADA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.18.	NEW MEXICO FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.19.	NORTH CAROLINA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.20.	NORTH DAKOTA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.21.	OKLAHOMA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.22.	OREGON FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.23.	SOUTH CAROLINA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.24.	SOUTH DAKOTA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.25.	TENNESSEE FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.26.	TEXAS FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.27.	UTAH FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.28.	WYOMING FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION - ACTIVE	UNDETERMINED	UNDETERMINED
62.29.	RHODE ISLAND SECRETARY OF STATE, CORPORATIONS DIVISION JURISDICTION ID 000025182 - ACTIVE	UNDETERMINED	UNDETERMINED
62.30.	RHODE ISLAND FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 000025182 - ACTIVE	UNDETERMINED	UNDETERMINED
62.31.	VERMONT SECRETARY OF STATE, CORPORATIONS/UCC DIVISION JURISDICTION ID 0064931 - ACTIVE	UNDETERMINED	UNDETERMINED
62.32.	VERMONT FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 0064931 - ACTIVE	UNDETERMINED	UNDETERMINED
62.33.	CONNECTICUT SECRETARY OF STATE, COMMERCIAL RECORDING DIVISION JURISDICTION ID 0516487 - ACTIVE	UNDETERMINED	UNDETERMINED
62.34.	CONNECTICUT FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 0516487 - ACTIVE	UNDETERMINED	UNDETERMINED

Debtor	New England Motor Freight, Inc.		Case number (if known) 19-12809
62.35.	OHIO FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 1668707 - ACTIVE	UNDETERMINED	UNDETERMINED
62.36.	OHIO SECRETARY OF STATE JURISDICTION ID 1668707 - ACTIVE	UNDETERMINED	UNDETERMINED
62.37.	ARIZONA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 1885935 - ACTIVE	UNDETERMINED	UNDETERMINED
62.38.	ARIZONA CORPORATION COMMISSION, CORPORATIONS DIVISION JURISDICTION ID 1885935 - ACTIVE	UNDETERMINED	UNDETERMINED
62.39.	MAINE SECRETARY OF STATE, BUREAU OF CORPORATIONS, ELECTIONS AND COMMISSIONS JURISDICTION ID 19950774 F - ACTIVE	UNDETERMINED	UNDETERMINED
62.40.	MAINE FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 19950774 F - ACTIVE	UNDETERMINED	UNDETERMINED
62.41.	INDIANA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 2008022800664 - ACTIVE	UNDETERMINED	UNDETERMINED
62.42.	INDIANA SECRETARY OF STATE, BUSINESS SERVICES DIVISION JURISDICTION ID 2008022800664 - ACTIVE	UNDETERMINED	UNDETERMINED
62.43.	NEW YORK DEPARTMENT OF STATE, DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE JURISDICTION ID 2121050 - ACTIVE	UNDETERMINED	UNDETERMINED
62.44.	NEW YORK FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 2121050 - ACTIVE	UNDETERMINED	UNDETERMINED
62.45.	MASSACHUSETTS SECRETARY OF THE COMMONWEALTH JURISDICTION ID 221977697 - ACTIVE	UNDETERMINED	UNDETERMINED
62.46.	MASSACHUSETTS FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 221977697 - ACTIVE	UNDETERMINED	UNDETERMINED
62.47.	WEST VIRGINIA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 244828 - ACTIVE	UNDETERMINED	UNDETERMINED
62.48.	WEST VIRGINIA SECRETARY OF STATE JURISDICTION ID 244828 - ACTIVE	UNDETERMINED	UNDETERMINED
62.49.	NEW HAMPSHIRE SECRETARY OF STATE, CORPORATION DIVISION JURISDICTION ID 310000 - ACTIVE	UNDETERMINED	UNDETERMINED
62.50.	NEW HAMPSHIRE FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 310000 - ACTIVE	UNDETERMINED	UNDETERMINED
62.51.	WASHINGTON OFFICE OF THE SECRETARY OF STATE, CORPORATIONS DIVISION JURISDICTION ID 602 384 123 - ACTIVE	UNDETERMINED	UNDETERMINED
62.52.	WASHINGTON FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 602 384 123 - ACTIVE	UNDETERMINED	UNDETERMINED
62.53.	NEW JERSEY (D) DEPARTMENT OF THE TREASURY, DIVISION OF REVENUE, BUSINESS SERVICES BUREAU JURISDICTION ID 6469750100 - ACTIVE	UNDETERMINED	UNDETERMINED
62.54.	NEW JERSEY (D) FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 6469750100 - ACTIVE	UNDETERMINED	UNDETERMINED

Debtor	New England Motor Freight, Inc.		Case number (if known) 19-12809
62.55.	ILLINOIS FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 65104172 - ACTIVE	UNDETERMINED	UNDETERMINED
62.56.	ILLINOIS SECRETARY OF STATE, DEPARTMENT OF BUSINESS SERVICES JURISDICTION ID 65104172 - ACTIVE	UNDETERMINED	UNDETERMINED
62.57.	MICHIGAN FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 801051496 - ACTIVE	UNDETERMINED	UNDETERMINED
62.58.	MICHIGAN CORPORATIONS, SECURITIES & COMMERCIAL LICENSING DIVISION JURISDICTION ID 801051496 - ACTIVE	UNDETERMINED	UNDETERMINED
62.59.	PENNSYLVANIA DEPARTMENT OF STATE, CORPORATION BUREAU JURISDICTION ID 945755 - ACTIVE	UNDETERMINED	UNDETERMINED
62.60.	PENNSYLVANIA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID 945755 - ACTIVE	UNDETERMINED	UNDETERMINED
62.61.	DISTRICT OF COLUMBIA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID C00005303544 - ACTIVE	UNDETERMINED	UNDETERMINED
62.62.	DISTRICT OF COLUMBIA DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS, BUSINESS AND PROFESSIONAL LICENSING ADMINISTRATION, CORPORATIONS DIVISION JURISDICTION ID C00005303544 - ACTIVE	UNDETERMINED	UNDETERMINED
62.63.	FLORIDA DEPARTMENT OF STATE, DIVISION OF CORPORATIONS JURISDICTION ID F00000007148 - ACTIVE	UNDETERMINED	UNDETERMINED
62.64.	FLORIDA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID F00000007148 - ACTIVE	UNDETERMINED	UNDETERMINED
62.65.	MISSOURI FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID F001323848 - ACTIVE	UNDETERMINED	UNDETERMINED
62.66.	MISSOURI SECRETARY OF STATE, BUSINESS SERVICES DEPARTMENT JURISDICTION ID F001323848 - ACTIVE	UNDETERMINED	UNDETERMINED
62.67.	MARYLAND STATE DEPARTMENT OF ASSESSMENTS AND TAXATION JURISDICTION ID F02270783 - ACTIVE	UNDETERMINED	UNDETERMINED
62.68.	MARYLAND FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID F02270783 - ACTIVE	UNDETERMINED	UNDETERMINED
62.69.	VIRGINIA STATE CORPORATION COMMISSION JURISDICTION ID F132580-4 - ACTIVE	UNDETERMINED	UNDETERMINED
62.70.	VIRGINIA FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID F132580-4 - ACTIVE	UNDETERMINED	UNDETERMINED
62.71.	DELAWARE SECRETARY OF STATE, DIVISION OF CORPORATIONS JURISDICTION ID MC112107 - ACTIVE	UNDETERMINED	UNDETERMINED
62.72.	DELAWARE FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID MC112107 - ACTIVE	UNDETERMINED	UNDETERMINED
62.73.	WISCONSIN FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, LICENSING & INSURANCE DIVISION JURISDICTION ID N049042 - ACTIVE	UNDETERMINED	UNDETERMINED
62.74.	WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS JURISDICTION ID N049042 - ACTIVE	UNDETERMINED	UNDETERMINED

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****63. Customer lists, mailing lists, or other compilations**

63.1. THE DEBTOR MAINTAINS A CUSTOMER LIST OF APPROXIMATELY 23,000 PARTIES CONTAINING NAME, ADDRESS AND E-MAILS OF ITS CUSTOMERS

UNDETERMINED _____ UNDETERMINED

64. Other intangibles, or intellectual property

64.1. _____ \$ _____ \$ _____

65. Goodwill

65.1. _____ \$ _____ \$ _____

66. Total of part 10

Add lines 60 through 65. Copy the total to line 89.

UNDETERMINED

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?☐ No☒ Yes**68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes**69. Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☒ Yes. Fill in the information below.

Current value of debtor's interest

71. Notes receivable

Description (include name of obligor)	Total face amount	Doubtful or uncollectible amount	Current value of debtor's interest
71.1. SPLIT-DOLLAR LIFE INSURANCE AGREEMENTS	\$5,208,569.08	- \$ _____ = →	\$5,208,569.08
SHEVELL FAMILY 2016 DYNASTY TRUST SOUTH DAKOTA TRUST COMPANY LLC FRANCES R BECKER, TRUSTEE 4020 JACKSON BLVD STE 3 RAPID CITY SD 57702			

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)	Tax refund amount	NOL amount	Tax year	Current value of debtor's interest
72.1. INTERNAL REVENUE SERVICE	\$40,000.00	\$ _____	2018	\$40,000.00

73. Interests in insurance policies or annuities

Insurance company	Insurance policy No.	Annuity issuer name	Annuity account type	Annuity account No.	Current value of debtor's interest
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Debtor **New England Motor Freight, Inc.** Case number (if known) **19-12809**

73.1.	AMERICAN BANKERS INS CO OF FL	N/A				UNDETERMINED
73.2.	AMERICAN BANKERS INS CO OF FL	AB00131015				UNDETERMINED
73.3.	CNA CONTINENTAL INS CO OF NEW JERSEY	596862231				UNDETERMINED
73.4.	CRC INSURANCE PROFESSIONAL RISK FACILITIES	596772089				UNDETERMINED
73.5.	ENDURANCE AMERICAN SPECIALTY	ARL100116927000				UNDETERMINED
73.6.	EVANSTON INSURANCE CO	MKLV3EVE100215				UNDETERMINED
73.7.	HARTFORD FIRE INSURANCE CO	10CSES35802				UNDETERMINED
73.8.	HARTFORD FIRE INSURANCE CO	99015129052019				UNDETERMINED
73.9.	HARTFORD FIRE INSURANCE CO	WC-AOS 10WN-S35800				UNDETERMINED
73.10.	IRONSHORE SPECIALTY INS CO	2746700				UNDETERMINED
73.11.	NATIONAL FIRE & MARINE INSURANCE	42RLO30354302				UNDETERMINED
73.12.	NATIONAL UNION FIRE INS CO OF PITTSBURG, PA	28804753				UNDETERMINED
73.13.	NEW JERSEY MANUFACTURERS INS.	WC-NJ W21713-3-18				UNDETERMINED
73.14.	RLI INSURANCE COMPANY	CAR 050 0036				UNDETERMINED
73.15.	ST. PAUL FIRE & MARINE INS CO	2T00594				UNDETERMINED
73.16.	UNITED STATES FIRE INS CO	5951007981				UNDETERMINED
73.17.	UNITED STATES FIRE INS CO	5951007981				UNDETERMINED
73.18.	ALLIANZ AGCS MARINE INSURANCE COMPANY	MXI93077459				UNDETERMINED
73.19.	AVIVA INS CO OF CANADA	6741090784				UNDETERMINED
73.20.	ENDURANCE AMERICAN SPECIALTY	ELD30000307701				UNDETERMINED
73.21.	GREAT AMERICAN ASSURANCE CO	EXC2275071				UNDETERMINED
73.22.	ILLINOIS UNION INSURANCE	G7111711A001				UNDETERMINED
73.23.	LIBERTY INSURANCE UNDERWRITERS	1000037020-07				UNDETERMINED
73.24.	LLOYD'S SYNDICATES C/O LOCKTON COS LLP	MACCD1602212				UNDETERMINED

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73.25.	MAINE EMPLOYERS' MUTUAL INS.	1810023953				UNDETERMINED
73.26.	NATIONAL SURETY CORP	SHX00049055965				UNDETERMINED
73.27.	STARR INDEMNITY & LIABILITY CO	1000600133171				UNDETERMINED
73.28.	UNITED STATES FIRE INS CO	5951007981				UNDETERMINED
73.29.	UNITED STATES FIRE INS CO (TRINITY)	VARIOUS				UNDETERMINED
73.30.	PROTECTIVE INSURANCE	B-13114/B-13115/B-13116				UNDETERMINED
73.31.	ARCH	WA7-73D-508113-016, -017, -018, -019, -010, -12 & -12				UNDETERMINED
73.32.	DISCOVER RE					UNDETERMINED
73.33.	TRAVELERS	303D6844 & 116D7953				UNDETERMINED
73.34.	FIDELITY					UNDETERMINED
73.35.	OHIO – (WORKERS COMP)					UNDETERMINED

74. Causes of action against third parties (whether or not a lawsuit has been filed)

		Nature of claim	Amount requested	Current value of debtor's interest
74.1.	NEW ENGLAND CONFECTIONARY COMPANY, INC.	UNPAID FREIGHT BILLS - PROOF OF CLAIM FILED IN BANKRUPTCY CASE NO 18-11217 USBC - DISTRICT OF MASSACHUSETTS.	\$516,534.24	UNDETERMINED
74.2.	ZACHARY FRAZIER/PROGRESSIVE INSURANCE	AUTO CLAIM - DAMAGES TO DEBTORS TRACTOR AND TRAILER	\$161,076.47	UNDETERMINED

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

		Nature of claim	Amount requested	Current value of debtor's interest
75.1.	BETHPAGE PROJECT 1 TAX APPEAL REFUND	TAX REFUND APPEAL	\$223,656.75	UNDETERMINED
75.2.	BETHPAGE PROJECT 2 TAX APPEAL REFUND	TAX REFUND APPEAL	\$80,204.25	UNDETERMINED
75.3.	DISCOVER RE	WORKERS' COMPENSATION RECEIVABLE	\$14,562.00	UNDETERMINED
75.4.	TRAVELERS	WORKERS' COMPENSATION RECEIVABLE	\$62,501.00	UNDETERMINED
75.5.	MAINE EMPLOYERS' MUTUAL INSURANCE COMPANY (MEMIC)	WORKERS' COMPENSATION RECEIVABLE	\$131,598.00	UNDETERMINED
75.6.	NEW JERSEY MANUFACTURERS INSURANCE COMPANY	WORKERS' COMPENSATION RECEIVABLE	\$50,285.00	UNDETERMINED
75.7.	OHIO BUREAU OF WORKERS' COMPENSATION	WORKERS' COMPENSATION RECEIVABLE	\$743,274.00	UNDETERMINED
75.8.	NYS WORKERS' COMPENSATION BOARD	WORKERS' COMPENSATION RECEIVABLE	\$60,787.00	UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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75.9.	VISTA UNDERWRITING PARTNERS, LLC	EXCESS MEDICAL CLAIMS RECEIVABLE	\$1,359,946.00	UNDETERMINED
75.10.	UNITED HEALTHCARE	MEDICAL & PHARMACY CLAIMS RECEIVABLE	\$240,000.00	UNDETERMINED
75.11.	NEXCLAIM RECOVERIES LLC	VARIOUS SUBROGATION CLAIMS	\$584,364.00	UNDETERMINED

76. Trusts, equitable or future interests in property

76.1. _____ \$ _____

77. Other property of any kind not already listed

Examples: Season tickets, country club membership

77.1.	DUE FROM REAL ESTATE AFFILIATE - NORTH RED TRUCK CORP	\$66,308.40
77.2.	DUE FROM REAL ESTATE AFFILIATE - CONCORD TERMINAL	\$48,000.00
77.3.	401K FORFEITURE-AS OF 12/31/15	\$17,305.55
77.4.	INSURANCE CLAIMS AND RECOVERIES	\$245,391.00
77.5.	HURRICANE RECOVERY CLAIM	\$90,000.00
77.6.	MISCELLANEOUS EMPLOYEE LOANS	\$3,259.20
77.7.	MISCELLANEOUS RENT RECEIVABLES	\$16,593.65
77.8.	INTERCOMPANY RECEIVABLE DUE FROM MYAR, LLC	\$193,754.30
77.9.	INTERCOMPANY RECEIVABLE DUE FROM HOLLYWOOD AVENUE SOLAR LLC	\$149,216.20
77.10.	INTERCOMPANY RECEIVABLE DUE FROM UNITED EXPRESS SOLAR, LLC	\$45,553.69
77.11.	INTERCOMPANY RECEIVABLE DUE FROM MYJON, LLC	\$195,000.00
77.12.	RECEIVABLE DUE FROM SHAREHOLDER, M. SHEVELL	\$10,492,517.00
77.13.	RECEIVABLE DUE FROM NANCY SHEVELL MCCARTNEY 2016 NON-GST EXEMPT IRREVOCABLE TRUST	\$574,275.00
77.14.	RECEIVABLE DUE FROM SUSAN S. COHEN 2016 NON-GST EXEMPT IRREVOCABLE TRUST	\$825,222.00
77.15.	RECEIVABLE DUE FROM SHEVELL FAMILY 2016 DYNASTY TRUST	\$122,219.00
77.16.	RECEIVABLE DUE FROM ZACHARY W. COHEN 1996 TRUST DATED OCTOBER 14, 1996	\$182,980.00
77.17.	RECEIVABLE DUE FROM MERISSA L. COHEN 1996 TRUST DATED OCTOBER 14, 1996	\$181,404.00
77.18.	RECEIVABLE DUE FROM ARLEN W. BLAKEMAN 1996 TRUST DATED OCTOBER 14, 1996	\$184,273.00
77.19.	RECEIVABLE DUE FROM NANCY BLAKEMAN GRANTOR TRUST	\$20,950.00

78. Total of part 11

Add lines 71 through 77. Copy the total to line 90.

\$18,902,791.07

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No
☐ Yes

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$8,611,571.22	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$6,004,671.19	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$35,234,175.26	
83. Investments. <i>Copy line 17, Part 4.</i>	UNDETERMINED	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$2,443,561.03	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$204,455.44	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$78,302,988.61	
88. Real property. <i>Copy line 56, Part 9.</i> →		\$10,572,612.48
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	UNDETERMINED	
90. All other assets. <i>Copy line 78, Part 11.</i> +	\$18,902,791.07	
91. Total. Add lines 80 through 90 for each column.91a.	\$149,704,213.82	+ 91b. \$10,572,612.48
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$160,276,826.30

Fill in this information to identify the case:

Debtor name: New England Motor Freight, Inc.

United States Bankruptcy Court for the: District of New Jersey

Case number (if known): 19-12809

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

**Column A
Amount of
Claim**
Do not deduct
the value of
collateral.

**Column B
Value of
collateral that
supports this
claim**

2.1. Creditor's name and address

CAPITAL ONE, N.A.
20 BROADHOLLOW RD
MELVILLE NY 11747

Creditor's email address, if known

Date debt was incurred: 4/7/2016

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____

Describe debtor's property that is subject to a lien

EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY SERIAL NO IN ANNEX 2

Describe the lien

UCC-1 RECORDED 4/7/2016 IN STATE OF NEW JERSEY AS DOCUMENT # 51620974

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes

Is anyone else liable on this claim?

- ☐ No
- ☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
- ☐ Unliquidated
- ☐ Disputed

\$2,029,465.95 UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

2.2. Creditor's name and address	Describe debtor's property that is subject to a lien		
CAPITAL ONE, N.A. 20 BROADHOLLOW RD MELVILLE NY 11747	EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY SERIAL NO IN ANNEX 2	\$0.00	UNDETERMINED
Creditor's email address, if known _____	Describe the lien UCC-1 RECORDED 12/15/16 IN STATE OF NEW JERSEY AS DOCUMENT # 51995687		
Date debt was incurred: 12/15/2016	Is the creditor an insider or related party?		
Last 4 digits of account number:	<input checked="" type="checkbox"/> No		
Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Yes		
<input checked="" type="checkbox"/> No	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> No		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	As of the petition filing date, the claim is: Check all that apply.		
	<input checked="" type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
2.3. Creditor's name and address	Describe debtor's property that is subject to a lien		
CATERPILLAR FINANCIAL SERVICES CORPORATION PO BOX 56347 JACKSONVILLE FL 32241-6347	VARIOUS TRACTORS AS MORE SPECIFICALLY DESCRIBED BY MAKE, MODEL AND SERIAL # IN ATTACHMENT	UNDETERMINED	UNDETERMINED
Creditor's email address, if known _____	Describe the lien UCC-1 RECORDED 10/20/2010 IN STATE OF NEW JERSEY AND AS CONTINUED 7/16/2015		
Date debt was incurred: 10/20/2010	Is the creditor an insider or related party?		
Last 4 digits of account number:	<input checked="" type="checkbox"/> No		
Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Yes		
<input checked="" type="checkbox"/> No	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> No		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	As of the petition filing date, the claim is: Check all that apply.		
	<input checked="" type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

2.4. Creditor's name and address	Describe debtor's property that is subject to a lien	
DAIMLER TRUST 13650K HERITAGE PARKWAY FT WORTH TX 76177	ALL OF THE DEBTOR'S (I) NEW AND USED MOTOR VEHICLES, TRAILERS AND/OR CHASSIS, NOW OWNED OR HEREAFTER ACQUIRED, FINANCED BY, LEASED FROM OR PURCHASED	\$6,035,387.35 UNDETERMINED
Creditor's email address, if known _____	Describe the lien	
Date debt was incurred: 12/19/2014	UCC-1 RECORDED 12/19/2014 IN THE STATE OF NEW JERSEY AS DOCUMENT # 51037996	
Last 4 digits of account number:		
Do multiple creditors have an interest in the same property?	Is the creditor an insider or related party?	
<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Yes	
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____	Is anyone else liable on this claim?	
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<input type="checkbox"/> No	
	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	As of the petition filing date, the claim is: Check all that apply.	
	<input checked="" type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
2.5. Creditor's name and address	Describe debtor's property that is subject to a lien	
DE LAGE LANDEN FINANCIAL SERVICES 1111 OLD EAGLE SCHOOL RD WAYNE PA 19087	COLLATERAL AS MORE SPECIFICALLY DESCRIBED IN SCHEDULE A ATTACHED	UNDETERMINED UNDETERMINED
Creditor's email address, if known _____	Describe the lien	
Date debt was incurred: 7/22/2014	UCC-1 RECORDED 7/22/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 26579849 AND AS AMENDED 10/14/2014	
Last 4 digits of account number:	Is the creditor an insider or related party?	
Do multiple creditors have an interest in the same property?	<input checked="" type="checkbox"/> No	
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	
<input type="checkbox"/> Yes. Have you already specified the relative priority?	Is anyone else liable on this claim?	
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	As of the petition filing date, the claim is: Check all that apply.	
	<input checked="" type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.6. **Creditor's name and address**
- DE LAGE LANDEN FINANCIAL SERVICES
1111 OLD EAGLE SCHOOL RD
WAYNE PA 19087
- Creditor's email address, if known**
- _____
- Date debt was incurred:** 9/9/2016
- Last 4 digits of account number:**
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- COLLATERAL AS MORE SPECIFICALLY DESCRIBED IN SCHEDULE A ATTACHED
- Describe the lien**
- UCC-1 RECORDED 9/9/2016 IN STATE OF NEW JERSEY AS DOCUMENT # 51854153
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☐ Disputed
- UNDETERMINED UNDETERMINED
- 2.7. **Creditor's name and address**
- DE LAGE LANDEN FINANCIAL SERVICES
1111 OLD EAGLE SCHOOL RD
WAYNE PA 19087
- Creditor's email address, if known**
- _____
- Date debt was incurred:** 7/18/2016
- Last 4 digits of account number:**
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- COLLATERAL AS MORE SPECIFICALLY DESCRIBED IN SCHEDULE A ATTACHED
- Describe the lien**
- UCC-1 RECORDED 7/18/2016 IN STATE OF NEW JERSEY AS DOCUMENT # 51776187
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☐ Disputed
- UNDETERMINED UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.8. **Creditor's name and address**
- EAST WEST BANK
PO BOX 1406
ALPHARETTA GA 30009
- Creditor's email address, if known**
- _____
- Date debt was incurred:** 4/5/2017
- Last 4 digits of account number:**
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- BANK LOAN \$8,990,035.55 UNDETERMINED
- Describe the lien**
- UCC-1 RECORDED 4/5/2017 IN STATE OF NEW JERSEY AS DOCUMENT # 52156452
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☐ No
- ☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☐ Disputed
- 2.9. **Creditor's name and address**
- EAST WEST BANK
PO BOX 1406
ALPHARETTA GA 30009
- Creditor's email address, if known**
- _____
- Date debt was incurred:** 5/4/2018
- Last 4 digits of account number:**
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- BANK LOAN \$0.00 UNDETERMINED
- Describe the lien**
- UCC-1 RECORDED 5/4/2018 IN STATE OF NEW JERSEY AS DOCUMENT # 52766321
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☐ No
- ☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☐ Disputed

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

2.10. Creditor's name and address EAST WEST BANK PO BOX 1406 ALPHARETTA GA 30009 Creditor's email address, if known _____ Date debt was incurred: 4/10/2017 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien BANK LOAN \$0.00 UNDETERMINED Describe the lien UCC-1 RECORDED 4/10/2017 IN STATE OF NEW JERSEY AS DOCUMENT # 52164284 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.11. Creditor's name and address FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263 Creditor's email address, if known _____ Date debt was incurred: 10/27/2017 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien RIGHT TITLE AND INTEREST IN EQUIPMENT AND INTANGIBLES AS MORE SPECIFICALLY DESCRIBED IN ATTACHMENT \$7,370,036.75 UNDETERMINED Describe the lien UCC-1 RECORDED 10/27/2017 IN STATE OF NEW JERSEY AS DOCUMENT # 52476112 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

2.12. Creditor's name and address FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263 Creditor's email address, if known _____ Date debt was incurred: 10/31/2014 Last 4 digits of account number: _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY VIN AND SERIAL NOS. \$0.00 UNDETERMINED Describe the lien UCC-1 RECORDED 10/31/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 50993084 AND AS AMENDED 8/21/2015 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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2.13. Creditor's name and address FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263 Creditor's email address, if known _____ Date debt was incurred: 6/11/2014 Last 4 digits of account number: _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY VIN AND SERIAL NOS. \$0.00 UNDETERMINED Describe the lien UCC-1 RECORDED 6/11/2015 IN STATE OF NEW JERSEY AS DOCUMENT # 51205324 AND AS AMENDED 8/20/2015 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

2.14. Creditor's name and address FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263 Creditor's email address, if known _____ Date debt was incurred: 9/25/2015 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY VIN AND SERIAL NOS. \$0.00 UNDETERMINED Describe the lien UCC-1 RECORDED 9/25/2015 IN STATE OF NEW JERSEY AS DOCUMENT # 51341392 AND AS AMENDED 5/26/2016 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.15. Creditor's name and address FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263 Creditor's email address, if known _____ Date debt was incurred: 10/3/2016 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY SERIAL NOS. \$0.00 UNDETERMINED Describe the lien UCC-1 RECORDED 10/3/2016 IN STATE OF NEW JERSEY AS DOCUMENT # 51887272 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Debtor **New England Motor Freight, Inc.**

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<p>2.16. Creditor's name and address</p> <p>FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: 3/27/2017</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY VIN AND SERIAL NOS.</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 3/27/2017 IN STATE OF NEW JERSEY AS DOCUMENT # 52140075</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$0.00</p>	<p>UNDETERMINED</p>
<p>2.17. Creditor's name and address</p> <p>FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: 9/19/2017</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>CAMERAS & EQUIPMENT MORE SPECIFICALLY DESCRIBED IN SCHEDULE A</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 9/19/2017 IN STATE OF NEW JERSEY AS DOCUMENT # 52413054</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$0.00</p>	<p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

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2.18. Creditor's name and address FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263 Creditor's email address, if known _____ Date debt was incurred: 6/26/2017 Last 4 digits of account number: _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien INVENTORY, EQUIPMENT & FIXTURES MORE SPECIFICALLY DESCRIBED IN ATTACHED INVOICES Describe the lien UCC-1 RECORDED 6/26/2017 IN STATE OF NEW JERSEY AS DOCUMENT # 52287653 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 UNDETERMINED
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2.19. Creditor's name and address FIFTH THIRD BANK 38 FOUNTAIN SQ PLAZA MD 10904A CINCINNATI OH 45263 Creditor's email address, if known _____ Date debt was incurred: _____ Last 4 digits of account number: _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien _____ Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$2,796,001.95 UNDETERMINED
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Debtor **New England Motor Freight, Inc.**

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2.20. **Creditor's name and address**

IBM CREDIT LLC
ONE NORTH CASTLE DRIVE
ARMONK NY 10504

Creditor's email address, if known

Date debt was incurred: 5/16/2016

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines: _____

Describe debtor's property that is subject to a lien

EQUIPMENT, MAINTENANCE AND SOFTWARE

Describe the lien

UCC-1 RECORDED 5/16/2016 IN STATE OF NEW JERSEY AS DOCUMENT # 51680473

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.

☒ Contingent

☐ Unliquidated

☐ Disputed

UNDETERMINED UNDETERMINED

2.21. **Creditor's name and address**

JPMORGAN CHASE BANK, N.A.
1111 POLARIS PARKWAY
SUITE A-3
COLUMBUS OH 43240

Creditor's email address, if known

Date debt was incurred: _____

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines: _____

Describe debtor's property that is subject to a lien

LETTER OF CREDIT

\$10,346,000.00 \$6,454,240.72

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.

☒ Contingent

☐ Unliquidated

☒ Disputed

Debtor **New England Motor Freight, Inc.**

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2.22. Creditor's name and address	Describe debtor's property that is subject to a lien		
JPMORGAN CHASE BANK, N.A. 1111 POLARIS PARKWAY SUITE A-3 COLUMBUS OH 43240	EQUIPMENT, VEHICLES, TELEPHONES & HAND HELD DEVICES AS MORE SPECIFICALLY DESCRIBED IN MASATER LEASE DATED 4/3/2014	\$3,915,167.22	UNDETERMINED
Creditor's email address, if known _____	Describe the lien		
Date debt was incurred: 5/9/2014	UCC-1 RECORDED 5/9/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 40829082 AND AS AMENDED 5/22/2014, 6/2/2014, 6/9/2015 AND 9/25/2015 AND AS CONTINUED 11/26/2018		
Last 4 digits of account number:			
Do multiple creditors have an interest in the same property?	Is the creditor an insider or related party?		
<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Yes		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	As of the petition filing date, the claim is: Check all that apply.		
	<input checked="" type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
2.23. Creditor's name and address	Describe debtor's property that is subject to a lien		
JPMORGAN CHASE BANK, N.A. 1111 POLARIS PARKWAY SUITE A-3 COLUMBUS OH 43240	EQUIPMENT AS MORE SPECIFICALLY DESCRIBED IN EXHIBIT A	\$0.00	UNDETERMINED
Creditor's email address, if known _____	Describe the lien		
Date debt was incurred: 5/29/2014	UCC-1 RECORDED 5/29/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 50847990 AND AS AMENDED 9/25/2015 AND AS CONTINUED 12/17/2018		
Last 4 digits of account number:			
Do multiple creditors have an interest in the same property?	Is the creditor an insider or related party?		
<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Yes		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	As of the petition filing date, the claim is: Check all that apply.		
	<input checked="" type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		

Debtor **New England Motor Freight, Inc.**

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- 2.24. **Creditor's name and address**
- JPMORGAN CHASE BANK, N.A.
1111 POLARIS PARKWAY
SUITE A-3
COLUMBUS OH 43240
- Creditor's email address, if known**
- _____
- Date debt was incurred:** 6/2/2014
- Last 4 digits of account number:**
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- EQUIPMENT AS MORE SPECIFICALLY DESCRIBED IN EXHIBIT A TO MASTER LEASE DATED 4/3/2014
- Describe the lien**
- UCC-1 RECORDED 6/2/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 50849796 AND AS AMENDED 9/25/2015 AND AS CONTINUED 12/17/2018
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☐ No
- ☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☐ Disputed
- \$0.00 UNDETERMINED
- 2.25. **Creditor's name and address**
- JPMORGAN CHASE BANK, N.A.
1111 POLARIS PARKWAY
SUITE A-3
COLUMBUS OH 43240
- Creditor's email address, if known**
- _____
- Date debt was incurred:** 11/5/2014
- Last 4 digits of account number:**
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- EQUIPMENT AS MORE SPECIFICALLY DESCRIBED IN EXHIBIT A TO MASTER LEASE DATED 4/3/2014
- Describe the lien**
- UCC-1 RECORDED 11/5/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 50997121
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☐ No
- ☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☐ Disputed
- \$0.00 UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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<p>2.26. Creditor's name and address</p> <p>JPMORGAN CHASE BANK, N.A. 1111 POLARIS PARKWAY SUITE A-3 COLUMBUS OH 43240</p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred: 12/24/2014</p> <p>Last 4 digits of account number: _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>VEHICLES & EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY VIN & SERIAL NOS. \$0.00 UNDETERMINED</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 12/24/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 51041830</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
<p>2.27. Creditor's name and address</p> <p>JPMORGAN CHASE BANK, N.A. 1111 POLARIS PARKWAY SUITE A-3 COLUMBUS OH 43240</p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred: 3/1/2016</p> <p>Last 4 digits of account number: _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>EQUIPMENT CONSISTING OF VEHICLES & FORKLIFTS PURSUANT TO MASTER LEASE DATED 4/23/2014 \$0.00 UNDETERMINED</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 3/1/2016 IN STATE OF NEW JERSEY AS DOCUMENT # 51563455 AND AS AMENDED 12/30/2016</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>

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<p>2.28. Creditor's name and address</p> <p>JPMORGAN CHASE BANK, N.A. 1111 POLARIS PARKWAY SUITE A-3 COLUMBUS OH 43240</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: 3/23/2016</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p style="padding-left: 20px;"><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>GREAT DANE TRAILERS AS MORE SPECIFICALLY DESCRIBED BY VIN</p> <p style="text-align: right;">\$0.00 UNDETERMINED</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 3/23/2016 IN STATE OF NEW JERSEY AS DOCUMENT # 51595933</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
<p>2.29. Creditor's name and address</p> <p>SANTANDER BANK 450 PENN ST READING PA 19602</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: 9/22/2015</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p style="padding-left: 20px;"><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>VARIOUS EQUIPMENT MORE SPECIFICALLY DESCRIBED BY VIN</p> <p style="text-align: right;">\$5,526,876.90 UNDETERMINED</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 9/22/2015 IN STATE OF NEW JERSEY AS DOCUMENT # 51335713</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>

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2.30. Creditor's name and address SANTANDER BANK 450 PENN ST READING PA 19602 Creditor's email address, if known _____ Date debt was incurred: 12/17/2015 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien VARIOUS EQUIPMENT & VEHICLES MORE SPECIFICALLY DESCRIBED BY VIN & SERIAL #S \$0.00 UNDETERMINED Describe the lien UCC-1 RECORDED 12/17/2015 IN STATE OF NEW JERSEY AS DOCUMENT # 51461492 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.31. Creditor's name and address SANTANDER BANK 450 PENN ST READING PA 19602 Creditor's email address, if known _____ Date debt was incurred: 10/14/2015 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	Describe debtor's property that is subject to a lien VARIOUS TRACTORS AS MORE SPECIFICALLY DESCRIBED BY SERIAL #S \$0.00 UNDETERMINED Describe the lien UCC-1 RECORDED 10/14/2015 IN STATE OF NEW JERSEY AS DOCUMENT # 51366735 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

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<p>2.32. Creditor's name and address</p> <p>SANTANDER BANK 450 PENN ST READING PA 19602</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred: _____</p> <p>Last 4 digits of account number: _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>_____</p> <p>Describe the lien</p> <p>_____</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p>	<p>\$726,131.26</p> <p>UNDETERMINED</p>
<p>2.33. Creditor's name and address</p> <p>TD BANK NA 1701 ROUTE 70 EAST CHERRY HILL NJ 08034</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred: 12/17/2017</p> <p>Last 4 digits of account number: _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>PURCHASE MONEY SECURITY INTEREST AS MORE SPECIFICALLY DESCRIBED IN EXHIBIT A</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 12/17/2017 IN STATE OF NEW JERSEY AS DOCUMENT # 52546482</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p>	<p>\$6,786,964.69</p> <p>UNDETERMINED</p>

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<p>2.34. Creditor's name and address</p> <p>TD BANK NA 1701 ROUTE 70 EAST CHERRY HILL NJ 08034</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: 12/17/2017</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>LETTER OF CREDIT</p> <p style="text-align: right;">\$9,283,000.00 \$3,021,564.49</p> <p>Describe the lien</p> <hr/> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p>
<p>2.35. Creditor's name and address</p> <p>TD BANK NATIONAL ASSOCIATION 1701 ROUTE 70 EAST CHERRY HILL NJ 08034</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: 5/9/2014</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>EQUIPMENT AS MORE SPECIFICALLY DESCRIBED IN EXHIBIT A TO MASTER LEASE DATED 4/3/2014</p> <p style="text-align: right;">\$0.00 UNDETERMINED</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 6/25/2018 IN STATE OF NEW JERSEY AS DOCUMENT # 52857362</p> <p>Is the creditor an insider or related party?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p>

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<p>2.36. Creditor's name and address</p> <p>VFS LEASING CO PO BOX 26131 GREENSBORO NC 27402</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred: 12/19/2012</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>EQUIPMENT AND/OR VEHICLES AS MORE SPECIFICALLY DESCRIBED IN SCHEDULE A</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 12/29/2012 IN STATE OF NEW JERSEY AS DOCUMENT # 26301983 AND AS CONTINUED 8/22/2017 AND AMENDED 9/15/2017</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$0.00</p> <p>UNDETERMINED</p>	
<p>2.37. Creditor's name and address</p> <p>VFS US LLC PO BOX 26131 GREENSBORO NC 27402</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred: 12/19/2012</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>EQUIPMENT AND/OR VEHICLES AS MORE SPECIFICALLY DESCRIBED IN SCHEDULE A</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 12/29/2012 IN STATE OF NEW JERSEY AS DOCUMENT # 26301983 AND AS CONTINUED 8/22/2017 AND AMENDED 9/15/2017</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p>	<p>\$1,557,190.74</p> <p>UNDETERMINED</p>	

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<p>2.38. Creditor's name and address</p> <p>WEBSTER CAPITAL FINANCE, INC. 145 BANK STREET LEGAL DEPT MO-325 WATERBURY CT 06702</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred: 1/31/2014</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>VARIOUS EQUIPMENT LEASE PURSUANT TO MASTER SERVICES AGREEMENT AND MORE SPECIFICALLY IDENTIFIED BY MAKE, MODEL & SERIAL #</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 1/31/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 50736414 AND AS AMENDED 5/7/2014 AND CONTINUED 12/31/2018</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$971,157.66</p>	<p>UNDETERMINED</p>
<p>2.39. Creditor's name and address</p> <p>WEBSTER CAPITAL FINANCE, INC. 344 MAIN STREET KENSINGTON CT 06037</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred: 1/6/2014</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>VARIOUS EQUIPMENT LEASE PURSUANT TO MASTER SERVICES AGREEMENT AND MORE SPECIFICALLY IDENTIFIED BY MAKE, MODEL & SERIAL #</p> <p>Describe the lien</p> <p>UCC-1 RECORDED 1/6/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 50715754 AND AS CONTINUED 12/31/2018</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$0.00</p>	<p>UNDETERMINED</p>

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2.40. Creditor's name and address	Describe debtor's property that is subject to a lien		
WEBSTER CAPITAL FINANCE, INC. 344 MAIN STREET KENSINGTON CT 06037	VARIOUS EQUIPMENT LEASE PURSUANT TO MASTER SERVICES AGREEMENT AND MORE SPECIFICALLY IDENTIFIED BY MAKE, MODEL & SERIAL #	\$0.00	UNDETERMINED
Creditor's email address, if known _____	Describe the lien		
Date debt was incurred: 12/6/2013	UCC-1 RECORDED 12/6/2013 IN STATE OF NEW JERSEY AS DOCUMENT # 50691883 AND AS CONTINUED 11/30/2018		
Last 4 digits of account number:			
Do multiple creditors have an interest in the same property?	Is the creditor an insider or related party?		
<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Yes		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	As of the petition filing date, the claim is: Check all that apply.		
	<input checked="" type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
2.41. Creditor's name and address	Describe debtor's property that is subject to a lien		
WELLS FARGO EQUIPMENT FINANCE INC 733 MARQUETTE AVE STE 700 MINNEAPOLIS MN 55402	EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY SERIAL NO. IN CONTRACT 001-0225069, SCHEDULE A	\$3,243,776.15	UNDETERMINED
Creditor's email address, if known _____	Describe the lien		
Date debt was incurred: 3/11/2014	UCC-1 RECORDED 3/11/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 26518701 AND AS CONTINUED 9/25/2018		
Last 4 digits of account number:			
Do multiple creditors have an interest in the same property?	Is the creditor an insider or related party?		
<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Yes		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<input type="checkbox"/> No		
	<input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	As of the petition filing date, the claim is: Check all that apply.		
	<input checked="" type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input checked="" type="checkbox"/> Disputed		

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- 2.42. **Creditor's name and address**
- WELLS FARGO EQUIPMENT FINANCE INC
733 MARQUETTE AVE
STE 700
MINNEAPOLIS MN 55402
- Creditor's email address, if known**

- Date debt was incurred:** 10/31/2014
- Last 4 digits of account number:** _____
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.

- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY SERIAL NO. IN CONTRACT 001-0225069, SCHEDULE A
- Describe the lien**
- UCC-1 RECORDED 10/31/2014 IN STATE OF NEW JERSEY AS DOCUMENT # 26622262
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☐ No
- ☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☒ Disputed
- \$0.00 UNDETERMINED
- 2.43. **Creditor's name and address**
- WELLS FARGO EQUIPMENT FINANCE INC
733 MARQUETTE AVE
STE 700
MINNEAPOLIS MN 55402
- Creditor's email address, if known**

- Date debt was incurred:** 2/17/2015
- Last 4 digits of account number:** _____
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.

- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- EQUIPMENT AS MORE SPECIFICALLY DESCRIBED BY SERIAL NO. IN CONTRACT 001-0225069-707, SCHEDULE A
- Describe the lien**
- UCC-1 RECORDED 2/17/2015 IN STATE OF NEW JERSEY AS DOCUMENT # 26666587
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☐ No
- ☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☒ Contingent
- ☐ Unliquidated
- ☒ Disputed
- \$0.00 UNDETERMINED
3. **Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**
- \$69,577,192.17**

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

	Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
3.1.	CAPITAL ONE ROBERT HARVEY 499 THORNAL ST 11TH FLOOR EDISON NJ 08837	Line 2.1	_____
3.2.	CAPITAL ONE ROBERT HARVEY 499 THORNAL ST 11TH FLOOR EDISON NJ 08837	Line 2.2	_____
3.3.	CHIESA SHAHINIAN & GIANTOMASI PC FRANK PERETORE,ESQ ONE BOLAND DRIVE WEST ORANGE NJ 07052	Line 2.41	_____
3.4.	CHIESA SHAHINIAN & GIANTOMASI PC FRANK PERETORE,ESQ ONE BOLAND DRIVE WEST ORANGE NJ 07052	Line 2.42	_____
3.5.	CHIESA SHAHINIAN & GIANTOMASI PC FRANK PERETORE,ESQ ONE BOLAND DRIVE WEST ORANGE NJ 07052	Line 2.43	_____
3.6.	DAIMLER TRUST C/O BK SERVICING LLC P O BOX 131265 ROSEVILLE MN 55113-0011	Line 2.4	_____
3.7.	EAST WEST BANK ANDREW ROSS SVP 533 MADISON AVE 8TH FL NEW YORK NY 10022	Line 2.8	_____
3.8.	EAST WEST BANK ANDREW ROSS SVP 533 MADISON AVE 8TH FL NEW YORK NY 10022	Line 2.10	_____
3.9.	EAST WEST BANK ANDREW ROSS SVP 533 MADISON AVE 8TH FL NEW YORK NY 10022	Line 2.9	_____
3.10.	FRESHFIELDS BRUCKHAUS DERINGER MARK F LISCIO 601 LEXINGTON AVE 31ST FLOOR NEW YORK NY 10022	Line 2.22	_____

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3.11.	FRESHFIELDS BRUCKHAUS DERINGER MARK F LISCIO 601 LEXINGTON AVE 31ST FLOOR NEW YORK NY 10022	Line 2.23	_____
3.12.	FRESHFIELDS BRUCKHAUS DERINGER MARK F LISCIO 601 LEXINGTON AVE 31ST FLOOR NEW YORK NY 10022	Line 2.24	_____
3.13.	FRESHFIELDS BRUCKHAUS DERINGER MARK F LISCIO 601 LEXINGTON AVE 31ST FLOOR NEW YORK NY 10022	Line 2.25	_____
3.14.	FRESHFIELDS BRUCKHAUS DERINGER MARK F LISCIO 601 LEXINGTON AVE 31ST FLOOR NEW YORK NY 10022	Line 2.26	_____
3.15.	FRESHFIELDS BRUCKHAUS DERINGER MARK F LISCIO 601 LEXINGTON AVE 31ST FLOOR NEW YORK NY 10022	Line 2.27	_____
3.16.	FRESHFIELDS BRUCKHAUS DERINGER MARK F LISCIO 601 LEXINGTON AVE 31ST FLOOR NEW YORK NY 10022	Line 2.28	_____
3.17.	GEBHARDT & SMITH LLP JAMES M SMITH ONE SOUTH STREET SUITE 2200 BALTIMORE MD 21202-3281	Line 2.33	_____
3.18.	GEBHARDT & SMITH LLP DAVID V FONTANA,ESQ ONE SOUTH ST STE 2200 BALTIMORE MD 21202	Line 2.33	_____
3.19.	GEBHARDT & SMITH LLP LISA BITTLE TANCREDI ONE SOUTH STREET SUITE 2200 BALTIMORE MD 21202-3281	Line 2.33	_____
3.20.	GEBHARDT & SMITH LLP LISA BITTLE TANCREDI 1000 N WEST STREET SUITE 1200 WILMINGTON DE 19801	Line 2.33	_____
3.21.	GEBHARDT & SMITH LLP JAMES M SMITH ONE SOUTH STREET SUITE 2200 BALTIMORE MD 21202-3281	Line 2.34	_____
3.22.	GEBHARDT & SMITH LLP DAVID V FONTANA,ESQ ONE SOUTH ST STE 2200 BALTIMORE MD 21202	Line 2.34	_____

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3.23.	GEBHARDT & SMITH LLP LISA BITTLE TANCREDI ONE SOUTH STREET SUITE 2200 BALTIMORE MD 21202-3281	Line 2.34	_____
3.24.	GREENBERG TRAUIG ALAN J. BRODY 500 CAMPUS DRIVE SUITE 400 FLORHAM PARK NJ 07932	Line 2.22	_____
3.25.	GREENBERG TRAUIG ALAN J. BRODY 500 CAMPUS DRIVE SUITE 400 FLORHAM PARK NJ 07932	Line 2.23	_____
3.26.	GREENBERG TRAUIG ALAN J. BRODY 500 CAMPUS DRIVE SUITE 400 FLORHAM PARK NJ 07932	Line 2.24	_____
3.27.	GREENBERG TRAUIG ALAN J. BRODY 500 CAMPUS DRIVE SUITE 400 FLORHAM PARK NJ 07932	Line 2.25	_____
3.28.	GREENBERG TRAUIG ALAN J. BRODY 500 CAMPUS DRIVE SUITE 400 FLORHAM PARK NJ 07932	Line 2.26	_____
3.29.	GREENBERG TRAUIG ALAN J. BRODY 500 CAMPUS DRIVE SUITE 400 FLORHAM PARK NJ 07932	Line 2.27	_____
3.30.	GREENBERG TRAUIG ALAN J. BRODY 500 CAMPUS DRIVE SUITE 400 FLORHAM PARK NJ 07932	Line 2.28	_____
3.31.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.21	_____
3.32.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.22	_____
3.33.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.23	_____
3.34.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.24	_____

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3.35.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.25	_____
3.36.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.26	_____
3.37.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.27	_____
3.38.	JPMORGAN CHASE BANK, N.A. MICHAEL FONDACARO 250 PEHLE AVE STE 105 SADDLE BROOK NJ 07663	Line 2.28	_____
3.39.	MCCARTER & ENGLISH LLP PETER M KNOB,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.1	_____
3.40.	MCCARTER & ENGLISH LLP JOSEPH LUBERTAZZI JR.,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.1	_____
3.41.	MCCARTER & ENGLISH LLP PETER M KNOB,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.2	_____
3.42.	MCCARTER & ENGLISH LLP JOSEPH LUBERTAZZI JR.,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.2	_____
3.43.	MCCARTER & ENGLISH LLP PETER M KNOB,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.1	_____
3.44.	MCCARTER & ENGLISH LLP JOSEPH LUBERTAZZI JR.,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.1	_____
3.45.	MCCARTER & ENGLISH LLP PETER M KNOB,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.2	_____
3.46.	MCCARTER & ENGLISH LLP JOSEPH LUBERTAZZI JR.,ESQ FOUR GATEWAY CENTER 100 MULBERRY ST NEWARK NJ 07102	Line 2.2	_____

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3.47.	MCCARTER & ENGLISH, LLP PETER KNOB 100 MULBERRY STREET FOUR GATEWAY CENTER NEWARK NJ 07102	Line 2.1	_____
3.48.	MCCARTER & ENGLISH, LLP PETER KNOB 100 MULBERRY STREET FOUR GATEWAY CENTER NEWARK NJ 07102	Line 2.2	_____
3.49.	MCCARTER & ENGLISH, LLP PETER KNOB 100 MULBERRY STREET FOUR GATEWAY CENTER NEWARK NJ 07102	Line 2.1	_____
3.50.	MCCARTER & ENGLISH, LLP PETER KNOB 100 MULBERRY STREET FOUR GATEWAY CENTER NEWARK NJ 07102	Line 2.2	_____
3.51.	MCELROY DEUTSCH MULVANEY & CARPENTER LLP VIRGINIA T SHEA,ESQ 1300 MOUNT KEMBLE AVENUE MORRISTOWN NJ 07962	Line 2.36	_____
3.52.	MCELROY DEUTSCH MULVANEY & CARPENTER LLP GARY D BRESSLER,ESQ 300 DELAWARE AVE STE 770 WILMINGTON DE 19801	Line 2.36	_____
3.53.	MCELROY DEUTSCH MULVANEY & CARPENTER LLP VIRGINIA T SHEA,ESQ 1300 MOUNT KEMBLE AVENUE MORRISTOWN NJ 07962	Line 2.37	_____
3.54.	MCELROY DEUTSCH MULVANEY & CARPENTER LLP GARY D BRESSLER,ESQ 300 DELAWARE AVE STE 770 WILMINGTON DE 19801	Line 2.37	_____
3.55.	MCMANIMON, SCOTLAND AND BAUMANN, LLC ANTHONY SODONO, III; SARI PLACONA 75 LIVINGSTON AVE ROSELAND NJ 07068	Line 2.4	_____
3.56.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.11	_____
3.57.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.12	_____
3.58.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.13	_____
3.59.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.14	_____
3.60.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.15	_____

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3.61.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.16	_____
3.62.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.17	_____
3.63.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.18	_____
3.64.	REED SMITH LLP CHRISTOPHER A. LYNCH 599 LEXINGTON AVE NEW YORK NY 10022	Line 2.19	_____
3.65.	SANTANDER BANK BRIAN BRAUNGARD VP 200 PARK AVE STE 100 FLORHAM PARK NJ 07932	Line 2.29	_____
3.66.	SANTANDER BANK BRIAN BRAUNGARD VP 200 PARK AVE STE 100 FLORHAM PARK NJ 07932	Line 2.30	_____
3.67.	SANTANDER BANK BRIAN BRAUNGARD VP 200 PARK AVE STE 100 FLORHAM PARK NJ 07932	Line 2.31	_____
3.68.	SANTANDER BANK BRIAN BRAUNGARD VP 200 PARK AVE STE 100 FLORHAM PARK NJ 07932	Line 2.32	_____
3.69.	SQUIRE PATTON BOGGS NORMAN N KINEL 30 ROCKEFELLER PLAZA NEW YORK NY 10112	Line 2.8	_____
3.70.	SQUIRE PATTON BOGGS NORMAN N KINEL 30 ROCKEFELLER PLAZA NEW YORK NY 10112	Line 2.10	_____
3.71.	SQUIRE PATTON BOGGS NORMAN N KINEL 30 ROCKEFELLER PLAZA NEW YORK NY 10112	Line 2.10	_____
3.72.	SQUIRE PATTON BOGGS (US) LLP NORMAN N KINEL,ESQ 30 ROCKEFELLER PLAZA, 23RD FLOOR NEW YORK NY 10112	Line 2.8	_____
3.73.	SQUIRE PATTON BOGGS (US) LLP NORMAN N KINEL,ESQ 30 ROCKEFELLER PLAZA, 23RD FLOOR NEW YORK NY 10112	Line 2.9	_____
3.74.	SQUIRE PATTON BOGGS (US) LLP NORMAN N KINEL,ESQ 30 ROCKEFELLER PLAZA, 23RD FLOOR NEW YORK NY 10112	Line 2.9	_____

Debtor **New England Motor Freight, Inc.**

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3.75.	TROUTMAN SANDERS DAVID A PISCIOTTA 875 THIRD AVENUE NEW YORK NY 10022	Line 2.29	_____
3.76.	TROUTMAN SANDERS LOUIS CURCIO 875 THIRD AVENUE NEW YORK NY 10022	Line 2.29	_____
3.77.	TROUTMAN SANDERS ALISSA PICCIONE 875 THIRD AVENUE NEW YORK NY 10022	Line 2.29	_____
3.78.	TROUTMAN SANDERS DAVID A PISCIOTTA 875 THIRD AVENUE NEW YORK NY 10022	Line 2.30	_____
3.79.	TROUTMAN SANDERS LOUIS CURCIO 875 THIRD AVENUE NEW YORK NY 10022	Line 2.30	_____
3.80.	TROUTMAN SANDERS ALISSA PICCIONE 875 THIRD AVENUE NEW YORK NY 10022	Line 2.30	_____
3.81.	TROUTMAN SANDERS DAVID A PISCIOTTA 875 THIRD AVENUE NEW YORK NY 10022	Line 2.31	_____
3.82.	TROUTMAN SANDERS LOUIS CURCIO 875 THIRD AVENUE NEW YORK NY 10022	Line 2.31	_____
3.83.	TROUTMAN SANDERS ALISSA PICCIONE 875 THIRD AVENUE NEW YORK NY 10022	Line 2.31	_____
3.84.	TROUTMAN SANDERS DAVID A PISCIOTTA 875 THIRD AVENUE NEW YORK NY 10022	Line 2.32	_____
3.85.	TROUTMAN SANDERS LOUIS CURCIO 875 THIRD AVENUE NEW YORK NY 10022	Line 2.32	_____
3.86.	TROUTMAN SANDERS ALISSA PICCIONE 875 THIRD AVENUE NEW YORK NY 10022	Line 2.32	_____
3.87.	TROUTMAN SANDERS LLP LOUIS A CURCIO,ESQ 875 THIRD AVE NEW YORK NY 10022	Line 2.29	_____
3.88.	TROUTMAN SANDERS LLP DAVID A PISCIOTTA,ESQ 875 THIRD AVE NEW YORK NY 10022	Line 2.29	_____

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3.89.	TROUTMAN SANDERS LLP LOUIS A CURCIO,ESQ 875 THIRD AVE NEW YORK NY 10022	Line 2.30	_____
3.90.	TROUTMAN SANDERS LLP DAVID A PISCIOTTA,ESQ 875 THIRD AVE NEW YORK NY 10022	Line 2.30	_____
3.91.	TROUTMAN SANDERS LLP LOUIS A CURCIO,ESQ 875 THIRD AVE NEW YORK NY 10022	Line 2.31	_____
3.92.	TROUTMAN SANDERS LLP DAVID A PISCIOTTA,ESQ 875 THIRD AVE NEW YORK NY 10022	Line 2.31	_____
3.93.	UPDIKE KELLY & SPELLACY PC EVAN S GOLDSTEIN, ESQ 100 PEARL ST.,17TH FLOOR P O BOX 231277 HARTFORD CT 06123-1277	Line 2.38	_____
3.94.	UPDIKE KELLY & SPELLACY PC EVAN S GOLDSTEIN, ESQ 100 PEARL ST.,17TH FLOOR P O BOX 231277 HARTFORD CT 06123-1277	Line 2.39	_____
3.95.	UPDIKE KELLY & SPELLACY PC EVAN S GOLDSTEIN, ESQ 100 PEARL ST.,17TH FLOOR P O BOX 231277 HARTFORD CT 06123-1277	Line 2.40	_____
3.96.	VFS US LLC JACKIE INGE NORTH AMERICAN TRANSACTION SER PO BOX 7247-6171 PHILADELPHIA PA 19170-6171	Line 2.36	_____
3.97.	VFS US LLC JACKIE INGE NORTH AMERICAN TRANSACTION SER PO BOX 7247-6171 PHILADELPHIA PA 19170-6171	Line 2.37	_____
3.98.	WEBSTER CAPITAL FINANCE, INC. 344 MAIN STREET KENSINGTON CT 6037	Line 2.38	_____

Fill in this information to identify the case:

Debtor name: New England Motor Freight, Inc.

United States Bankruptcy Court for the: District of New Jersey

Case number (if known): 19-12809

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1.	Priority creditor's name and mailing address MASSACHUSETTS DEPARTMENT OF REVENUE BANKRUPTCY UNIT PO BOX 9564 BOSTON MA 02114	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Total claim \$272,877.11	Priority amount \$272,877.11
	Date or dates debt was incurred VARIOUS	Basis for the claim: SALES & USE TAXES		Nonpriority amount \$0.00
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			

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2.2. ¹	Priority creditor's name and mailing address WARN ACT LITIGATION KLEHR HARRISON HARVEY BRANZBURG, LLP CHARLES A. ERCOL AND RONA J ROSEN 10000 LINCOLN DRIVE EAST STE 201 MARLTON NJ 08053	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim UNDETERMINED	Priority amount UNDETERMINED
	Date or dates debt was incurred <hr/>	Basis for the claim: WARN ACT LITIGATION/WAGES		Nonpriority amount UNDETERMINED
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

¹SETTLED POST-PETITION BUT NOT YET PAID - SEE GLOBAL NOTES

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1.	Nonpriority creditor's name and mailing address 1129 COUNTY STREET LLC DAVID DONAHUE 95 BROOK STREET NEW BEDFORD MA 02746 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2.	Nonpriority creditor's name and mailing address 19 PETROLEUM DISTRIBUTION, INC 79 RT 520 ENGLISHTOWN NJ 07726 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$59,802.21
3.3.	Nonpriority creditor's name and mailing address 2 K'S LTD 2958 BRECKSVILLE ROAD RICHFIELD OH 44286 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,165.02

Debtor **New England Motor Freight, Inc.**

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3.4.	Nonpriority creditor's name and mailing address 2ND AVE LIGHTING CHARLENE MELNICK 55 ORISKANY BLVD YORKVILLE NY 13495-1348 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,362.50
3.5.	Nonpriority creditor's name and mailing address 3/13X LC JULIE JOHNSON 13325 WELLINGTON CTR GAINESVILLE VA 20155 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,045.25
3.6.	Nonpriority creditor's name and mailing address 3ARRETT LOGISTICS JESSICA CARR 1347 N MAIN ST ORRVILLE OH 44667-9761 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,274.05

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3.7.	Nonpriority creditor's name and mailing address 42GEARS MOBILITY SYSTEMS INC 48521 WARM SPRING BVD STE 303 FREMONT CA 94539 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$215.71
3.8.	Nonpriority creditor's name and mailing address A & D MAINTENANCE LEASING & REPAIRS, INC 118 WYANDANCH AVENUE WYANDANCH NY 11798 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,991.03
3.9.	Nonpriority creditor's name and mailing address A A A COOPER TRANS TERESA TYSON P O BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,265.00

Debtor **New England Motor Freight, Inc.**

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3.10.	Nonpriority creditor's name and mailing address A E S LOGISTICS 2505 SOUTH 320TH ST #625 FEDERAL WAY WA 98003-5429 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$92.21
3.11.	Nonpriority creditor's name and mailing address A&I PRODUCTS TINA VASQUEZ 1020 22ND AVE ROCK VALLEY IA 51247-1442 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$245.00
3.12.	Nonpriority creditor's name and mailing address A-1 VENDING INC PO BOX 338 BOILING SPRINGS PA 17007 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$279.84

Debtor **New England Motor Freight, Inc.**

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3.13.	Nonpriority creditor's name and mailing address AAA COOPER RENNA FOWLER 1751 KINSEY RD DOTHAN AL 36303-5877 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.14.	Nonpriority creditor's name and mailing address AAA COOPER TERESA JORDAN 1751 KINSEY RD DOTHAN AL 36303-5877 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.15.	Nonpriority creditor's name and mailing address AAA COOPER BRITTANI OVERSTREET PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$643.19

Debtor **New England Motor Freight, Inc.**

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3.16.	Nonpriority creditor's name and mailing address AAA COOPER JOVANI VELAZQUEZ 1751 KINSEY RD DOTHAN AL 36303-5877 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,491.83
3.17.	Nonpriority creditor's name and mailing address AAA COOPER AARON CORNETT 1751 KINSEY RD DOTHAN AL 36303-5877 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$3,008.87
3.18.	Nonpriority creditor's name and mailing address AAA COOPER HOLLY TAYLOR PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$3,062.29

Debtor **New England Motor Freight, Inc.**

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3.19.	Nonpriority creditor's name and mailing address AAA COOPER KAREN KELLY PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$4,142.46
3.20.	Nonpriority creditor's name and mailing address AAA COOPER RENNA FOWLER PO BOX 6827 DOTHAN AL 36303 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$5,513.32
3.21.	Nonpriority creditor's name and mailing address AAA COOPER BRITTANI TISON PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$7,213.06

Debtor **New England Motor Freight, Inc.**

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3.22.	Nonpriority creditor's name and mailing address AAA COOPER AARON CORNETT PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$9,769.24
3.23.	Nonpriority creditor's name and mailing address AAA COOPER HOLLY TAYLOR 1751 KINSEY RD DOTHAN AL 36303-5877 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$19,625.44
3.24.	Nonpriority creditor's name and mailing address AAA COOPER PO BOX 935003 ATLANTA GA 31193-5003 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$156,411.14

Debtor **New England Motor Freight, Inc.**

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3.25.	Nonpriority creditor's name and mailing address AAA COOPER PO BOX 935003 ATLANTA GA 31193-5003 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$418.00
3.26.	Nonpriority creditor's name and mailing address AAA COOPER AARON CORNETT PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$5,693.54
3.27.	Nonpriority creditor's name and mailing address AAA COOPER KAREN KELLY PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$844.59

Debtor **New England Motor Freight, Inc.**

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3.28.	Nonpriority creditor's name and mailing address AAA COOPER BRITTANI TISON PO BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$3,300.75
3.29.	Nonpriority creditor's name and mailing address AAA COOPER HOLLY TAYLOR 1751 KINSEY RD DOTHAN AL 36303-5877 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$5,111.34
3.30.	Nonpriority creditor's name and mailing address AAA COOPER TRANSPORTATION PO BOX 935003 ATLANTA GA 31193-5003 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$97,027.50

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3.31.	Nonpriority creditor's name and mailing address AAA KAM SERVICE, INC 125 20 150TH AVENUE SOUTH OZONE PARK NY 11420 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$233.94
3.32.	Nonpriority creditor's name and mailing address AAF FLANDERS C/O ARGUS P O BOX 4750 TROY MI 48099 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$65.52
3.33.	Nonpriority creditor's name and mailing address AARCO PRODUCTS AVI PERLSTEIN 21 OLD DOCK RD YAPHANK NY 11980-9702 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$381.11

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3.34.	Nonpriority creditor's name and mailing address ABB EPIS 41 WOODFORD AVE PLAINSVILLE CT 06062 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.35.	Nonpriority creditor's name and mailing address ABBOTT NUTRITION MARTY FEBUS 2900 EASTON SQUARE PL COLUMBUS OH 43229-9413 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$251.86
3.36.	Nonpriority creditor's name and mailing address AB-CON TERMITE SPECIALISTS 2927 HADDONFIELD ROAD PENNSAUKEN NJ 08110 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$165.27

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3.37.	Nonpriority creditor's name and mailing address ABERDEEN EXPRESS 2490B COMMERCE BLVD SHARONVILLE OH 45241 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,250.03
3.38.	Nonpriority creditor's name and mailing address ABH & SM RELIABLE TRANSPORTATION LLC 5927 SPRUCE STREET PHILADELPHIA PA 19139 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL LITIGATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.39.	Nonpriority creditor's name and mailing address ABINGTON COLLISION & TOWING 17225 JEB STUART HIGHWAY ABINGTON VA 24211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$350.00

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3.40.	Nonpriority creditor's name and mailing address AC & T PO BOX 4217 HAGERSTOWN MD 21741 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,660.30
3.41.	Nonpriority creditor's name and mailing address AC & T CO, INC PO BOX 4217 HAGERSTOWN MD 21741 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$40,097.60
3.42.	Nonpriority creditor's name and mailing address AC CASTLE NORMAN LEBLANC 100 CUMMINGS CTR STE 113-E5 BEVERLY MA 01915-6115 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,002.00

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3.43.	Nonpriority creditor's name and mailing address AC ELECTRIC CORP AUBURN MARCIA CLARK PO BOX 1508 AUBURN ME 04211 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.44.	Nonpriority creditor's name and mailing address ACCO BRANDS INC MERV COLLINS FOUR CORPORATE DR LAKE ZURICH IL 60047-8924 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$33,499.02
3.45.	Nonpriority creditor's name and mailing address ACCO BRANDS INC FOUR CORPORATE DR LAKE ZURICH IL 60047-8929 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$388.48

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3.46.	Nonpriority creditor's name and mailing address ACCURATE LOGISTICS MANDY B 130 MOONACHIE AVE CARLSTADT NJ 07072-2500 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$212.31
3.47.	Nonpriority creditor's name and mailing address ACME SUPPLY COMPANY LTD ZAHEER SHEIK 10 CEDAR SWAMP RD STE 7 GLEN COVE NY 11542-3700 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,200.00
3.48.	Nonpriority creditor's name and mailing address ACRO INDUSTRIES WILLIAM NORTHROP 554 COLFAX ST ROCHESTER NY 14606-3112 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$344.64

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3.49.	Nonpriority creditor's name and mailing address ACSI P O BOX 17423 NASHVILLE TN 37217 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25.88
3.50.	Nonpriority creditor's name and mailing address ACTION PLASTICS SCOTT GREENIER 3995 COMMERCIAL AVE NORTHBROOK IL 60062-1827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,464.14
3.51.	Nonpriority creditor's name and mailing address ACTION STAFFING GROUP P O BOX 75343 CHICAGO IL 60675-5343 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$33,166.80

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3.52.	Nonpriority creditor's name and mailing address ADAMS MANUFACTURING CORPORATION RHONDA CATALFAMO PO BOX 1 PORTERSVILLE PA 16051-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,064.57
3.53.	Nonpriority creditor's name and mailing address ADHERENT TECHNOLOGIES ROY GILBERT 16 MAPLE HILL DRIVE GRANBY CT 06035-1316 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,670.42
3.54.	Nonpriority creditor's name and mailing address ADHESIVE APPLICATIONS PASQUALE RETTURA 45 FERRY ST EASTHAMPTON MA 01027-1203 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$59.97

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3.55.	Nonpriority creditor's name and mailing address ADMINISTRACION PARA EL SUSTENO DE MENORES PO BOX 71442 SAN JUAN PR 00936 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$120.26
3.56.	Nonpriority creditor's name and mailing address ADMIRAL FIRE & SAFETY INC 9 HAIGIS PARKWAY SCARBOROUGH ME 04074 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$503.09
3.57.	Nonpriority creditor's name and mailing address ADP, INC. PO BOX 842875 BOSTON MA 02284-2854 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$810.87

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3.58.	Nonpriority creditor's name and mailing address ADS % IL2000 PO BOX 8372 VIRGINIA BEACH VA 23450-8372 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$900.54
3.59.	Nonpriority creditor's name and mailing address ADVANCED WHEEL SALES NICOLE CHASE 400 W WILSON BRIDGE RD STE 300 WORTHINGTON OH 43085-2259 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$546.00
3.60.	Nonpriority creditor's name and mailing address ADVANTAGE RESTORATION MARK VILLANO 17 CENTRAL AVE MILFORD CT 06460 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,000.00

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3.61.	Nonpriority creditor's name and mailing address AEE SOLAR CHRIS SMITH 775 FIERO LN STE 200 SAN LUIS OBISPO CA 93401-7904 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$110.44
3.62.	Nonpriority creditor's name and mailing address AEI WINDDOWN LIQUIDATING TRUST PROJECT PACHULSKI STANG ZIEHL & JONES LLP MICHAEL R. SEIDL 919 NORTH MARKET ST 17TH FLOOR WILMINGTON DE 19801 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL LITIGATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.63.	Nonpriority creditor's name and mailing address AEP PAYMENT PROCESSING PO BOX 371496 PITTSBURGH PA 15250-7496 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,559.21

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3.64.	Nonpriority creditor's name and mailing address AEROTEK COMMERCIAL STAFFING PO BOX 198531 ATLANTA GA 30384-8531 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,969.75
3.65.	Nonpriority creditor's name and mailing address AETNA DEBRA SMITH ET AL V NEW ENGLAND MOTOR FREIGHT INC STEVEN FRONHEISER 767 MARIAN DR MIDDLETOWN DE 19709 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.66.	Nonpriority creditor's name and mailing address AETNA DEBRA SMITH/ROSCOE SMITH RAWLINGS AND ASSOCIATES BRIGID A MCDONOUGH PO BOX 49 LAGRANGE KY 40031 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.67.	Nonpriority creditor's name and mailing address AFFILIATED TECHNOLOGY SOLUTIONS,LLC PO BOX 3300 EDISON NJ 08817 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,363.36
3.68.	Nonpriority creditor's name and mailing address AFFORDABLE TRAILER SOLUTIONS 7231 NORTHERN BLVD EAST SYRACUSE NY 13057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,948.38
3.69.	Nonpriority creditor's name and mailing address AGCS MARINE INSURANCE COMPANY, 225 WASHINGTON ST STE 1800 CHICAGO IL 60606 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.70.	Nonpriority creditor's name and mailing address AGILEX ALEX MORELL 20 ROOSEVELT AVE SOMERSET NJ 08873-5031 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,600.00
3.71.	Nonpriority creditor's name and mailing address AG-PRO COMPANIES JOHN DEERE DEALER 1200 DELMONT ROAD LANCASTER OH 43130-9550 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$480.65
3.72.	Nonpriority creditor's name and mailing address AGUIRRE*DONALD Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.73.	Nonpriority creditor's name and mailing address AGUIRRE*DONALD Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.74.	Nonpriority creditor's name and mailing address AIR GROUND EXPRESS PO BOX 438 CLINTON PA 15026 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$21,648.29
3.75.	Nonpriority creditor's name and mailing address AIR TIGER EXPRESS KEN PANG 149-09 183RD ST FL 2 SPRINGFIELD GARDENS NY 11413 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$679.44

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3.76.	Nonpriority creditor's name and mailing address AIRGAS USA LLC PO BOX 802576 CHICAGO IL 60680-2576 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$935.92
3.77.	Nonpriority creditor's name and mailing address AIRSTREAM INC CHRISTINA RICHARD 420 W PIKE ST JACKSON CENTER OH 45334-9727 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$239.00
3.78.	Nonpriority creditor's name and mailing address AIT WORLDWIDE ATTN : ACCOUNT PAY 701 N ROHLWING RD ITASCA IL 60107 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$209.97

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3.79.	Nonpriority creditor's name and mailing address AIT WORLDWIDE LOGISTICS INC CRYSTAL MERCADO PO BOX 66730 CHICAGO IL 60666-0730 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,113.92
3.80.	Nonpriority creditor's name and mailing address AJ LOGISTICS ROSE CROCILLA 2744 HYLAN BLVD PMB #524 STATEN ISLAND NY 10306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$234.05
3.81.	Nonpriority creditor's name and mailing address AJ LOGISTICS LLC ROSE CROCILLA 2744 HYLAN BLVD PMB 524 STATEN ISLAND NY 10306-4658 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,467.55

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3.82.	Nonpriority creditor's name and mailing address AJ MADISON SARAH LUNETTA 3605 13TH AVE BROOKLYN NY 11218-3707 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,467.23
3.83.	Nonpriority creditor's name and mailing address AJ OSTER JOANN ORICHIO 150 LACKAWANNA AVE PARSIPPANY NJ 07054-1057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,117.50
3.84.	Nonpriority creditor's name and mailing address AJ OSTER LLC JOANN ORICHIO 150 LACKAWANNA AVE PARSIPPANY NJ 07054-1057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,803.00

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3.85.	Nonpriority creditor's name and mailing address AKERMAN LLP POST OFFICE BOX 4906 ORLANDO FL 32802 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,661.00
3.86.	Nonpriority creditor's name and mailing address AKERS INDUSTRIES EDNA PERLMUSTER 115 SHAWMUT RD CANTON MA 02021-1438 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$118.00
3.87.	Nonpriority creditor's name and mailing address AL WARREN OIL COMPANY, INC P O BOX 2279 HAMMOND IN 46323 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,252.42

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3.88.	Nonpriority creditor's name and mailing address ALADDIN BAKERS INC EMILIA SCIECHOWSKA 240 25TH ST BROOKLYN NY 11232-1338 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.89.	Nonpriority creditor's name and mailing address ALADDIN BAKERS INC EMILIA SCIECHOWSKA 240 25TH STREET BROOKLYN NY 11232-1338 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$43.40
3.90.	Nonpriority creditor's name and mailing address ALBERT RUSSO, TRUSTEE PO BOX 933 MEMPHIS TN 38101-0933 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$125.00

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3.91.	Nonpriority creditor's name and mailing address ALCO CAPITAL GROUP RE HOMECCLICK LLC SAUL EWING ARNSTEIN AND LEHR LLP S RAVIN AND D PATEL ESQ 1037 RAYMOND BLVD STE 1520 NEWARK NJ 07102-5426 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.92.	Nonpriority creditor's name and mailing address ALISON TRANSPORT ANJANIE RAMNARINE 145 HOOK CREEK BLVD BLDG B4B VALLEY STREAM NY 11581-2299 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$702.03
3.93.	Nonpriority creditor's name and mailing address ALISON TRANSPORT % SHIPCO TRANSPORT INC 699 KAPKOWSKI RD ELIZABETH NJ 07201-2122 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,032.00

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3.94.	Nonpriority creditor's name and mailing address ALKALOL % REDWOOD MULTIMODAL 1765 N ELSTON AVE STE 216 CHICAGO IL 60642-1501 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,515.80
3.95.	Nonpriority creditor's name and mailing address ALL BRIGHT JANITORIAL SERVICES 290 WEST RIVER ROAD SUITE 5 HOOKSETT NH 03106-2655 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,400.00
3.96.	Nonpriority creditor's name and mailing address ALL PHASE ELECTRICAL SUPP ROGER ALBERT 1559 KING ST ENFIELD CT 06082-5844 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$364.50

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3.97.	Nonpriority creditor's name and mailing address ALL SYSTEMS BRAKE SERVICE, INC 110 WYANDANCH AVE WYANDANCH NY 11798 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,468.31
3.98.	Nonpriority creditor's name and mailing address ALLIANCE DESIGN INC 434 UNION BLVD TOTOWA NJ 07512 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$150.00
3.99.	Nonpriority creditor's name and mailing address ALLIED BUILDING PRODUCTS JEFFERSON COLBURN 245 42ND ST BROOKLYN NY 11232-2813 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.100.	Nonpriority creditor's name and mailing address ALLIED INTERNATIONAL CORPORATION HEATHER ADKINS 101 DOVER RD NE GLEN BURNIE MD 21060-6560 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$577.44
3.101.	Nonpriority creditor's name and mailing address ALLIED OLD ENGLISH DIPTI PATEL 100 MARKLEY STREET PORT READING NJ 07064-1821 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$81.72
3.102.	Nonpriority creditor's name and mailing address ALLSTATE INSURANCE A/S/O ANGELA ANTONUCCI LAW OFFICE OF JOHN TROP BRITTANY R USLANER ESQ 73 MARKET ST STE 375 YONKERS NY 10710 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.103.	Nonpriority creditor's name and mailing address ALLSTATE NATIONAL SUBRO PROCESSING LIZETTE VALDEZ PO BOX 660636 DALLAS TX 75266 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.104.	Nonpriority creditor's name and mailing address ALPHA CARD SYSTEMS, LLC P.O. BOX 231179 PORTLAND OR 97281 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$816.18
3.105.	Nonpriority creditor's name and mailing address ALPHONSO GILLIAM ATTORNEY FOR THE PLAINTIFF MARRONE LAW FIRM BRIAN MARCHESE 200 SOUTH BROAD ST PHILADELPHIA PA 13002 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.106.	Nonpriority creditor's name and mailing address ALPHONSO GILLIAM V NEW ENGLAND MOTOR FREIGHT INC ET AL MALACHI HAMPTON 884 GEORGES STATION RD GREENSBURG PA 15601 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.107.	Nonpriority creditor's name and mailing address ALPINE SPRINKLER INC 77 ETHAN ALLEN DRIVE SO BURLINGTON VT 05403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$254.50
3.108.	Nonpriority creditor's name and mailing address AL'S GARAGE 52 E. CATHRINE STREET BINGHAMPTON NY 13904 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,025.00

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3.109.	Nonpriority creditor's name and mailing address ALUF PLASTICS INC AVALON PIERRE 2 GLENSHAW ST ORANGEBURG NY 10962-1207 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$22,304.77
3.110.	Nonpriority creditor's name and mailing address ALUF PLASTICS INC AVALON PIERRE 2 GLENSHAW STREET ORANGEBURG NY 10962-1207 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,708.56
3.111.	Nonpriority creditor's name and mailing address AMARK LOGISTICS 28915 CLEMENS RD #200 WESTLAKE OH 44145-1177 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.64

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3.112.	Nonpriority creditor's name and mailing address AMAZON.COM % JAY FARNHAM 300 BOREN AVE SEATTLE WA 98109-5305 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,209.36
3.113.	Nonpriority creditor's name and mailing address AMAZON.COM % JAY FARNHAM 333 BOREN AVE SEATTLE WA 98109-3536 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,487.00
3.114.	Nonpriority creditor's name and mailing address AMAZON.COM JIM THATTIL 300 BOREN AVE SEATTLE WA 98109-5305 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$66,631.36

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3.115.	Nonpriority creditor's name and mailing address AMAZON.COM P O BOX 80683 SEATTLE WA 98108-0683 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$15,660.79
3.116.	Nonpriority creditor's name and mailing address AMER AIR FILTER CO C/O ARGUS LOGISTICS P O BOX 4750 TROY MI 48099-4750 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$65.28
3.117.	Nonpriority creditor's name and mailing address AMERICAN AIR FILTER CO % ARGUS LOGISTICS PO BOX 4750 TROY MI 48099-4750 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,610.96

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3.118.	Nonpriority creditor's name and mailing address AMERICAN ASPHALT PAVING CO 139 JOHNSON RD GREENSBURG PA 15601 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$165.00
3.119.	Nonpriority creditor's name and mailing address AMERICAN BANKERS INS CO OF FLORIDA 11222 QUAIL ROOST DR MIAMI FL 33157 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.120.	Nonpriority creditor's name and mailing address AMERICAN BEVERAGE CORP C/O TRAFFIC CONTROL PO BOX 18 DILLSBURG PA 17019-0018 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$410.59

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3.121.	Nonpriority creditor's name and mailing address AMERICAN EXPRESS COMPANY P.O. BOX 1270 NEWARK NJ 07101-1270 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$40,055.38
3.122.	Nonpriority creditor's name and mailing address AMERICAN HOSE & HYDRAULIC 700 21TH AVENUE PATERSON NJ 07513 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,115.97
3.123.	Nonpriority creditor's name and mailing address AMERICAN HOTEL REGISTER JASON EDGER 100 S MILWAUKEE AVE VERNON HILLS IL 60061-4322 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,575.52

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3.124.	Nonpriority creditor's name and mailing address AMERICAN HOTEL REGISTER JASON EDGER 100 S MILWAUKEE AVE VERNON HILLS IL 60061-4322 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,357.68
3.125.	Nonpriority creditor's name and mailing address AMERICAN SECURITY SERV, INC 1515 S HARLEM AVE FOREST PARK IL 60130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,118.50
3.126.	Nonpriority creditor's name and mailing address AMERICAN STANDARD MELISIA ROBINS 2105 ELM HILL PIKE STE 105 NASHVILLE TN 37210-3977 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,591.60

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3.127.	Nonpriority creditor's name and mailing address AMERICAN STANDARD D AND J ASSOCIATES 14545 J MILITARY TRA DELRAY BEACH FL 33484 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$431.83
3.128.	Nonpriority creditor's name and mailing address AMERICAN STANDARD, INC ATTN: LOGISTICS FINANCE 1 CENTENNIAL AVE PISCATAWAY NJ 08854 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,321.50
3.129.	Nonpriority creditor's name and mailing address AMERICAN STANDARD+ MELISIA ROBINS 2105 ELM HILL PIKE STE 105 NASHVILLE TN 37210-3977 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,355.07

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3.130.	Nonpriority creditor's name and mailing address AMERICAN STATES INS CO SUSAN REISS PO BOX 515097 LOS ANGELES CA 90051 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.131.	Nonpriority creditor's name and mailing address AMERICAN TRUCK PO BOX 183 SCARSDALE NY 10583-0183 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,287.21
3.132.	Nonpriority creditor's name and mailing address AMERICAN YEAST SALES KARA GILLEN 331 COMMERCE WAY STE 1 PEMBROKE NH 03275-3718 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,329.63

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3.133.	Nonpriority creditor's name and mailing address AMERICAN YEAST SALES CORP. MICHAEL P. GAGNON 311 COMMERCE WAY PEMBROKE NH 03275 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.134.	Nonpriority creditor's name and mailing address AMERILIFT, LLC 700 CEDAR AVENUE MIDDLESEX NJ 08846 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,812.63
3.135.	Nonpriority creditor's name and mailing address AMERIMAX HOME PRODUCTS % OMNIMAX INTL 4455 RIVER GREEN PKWY DULUTH GA 30096-2565 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$45,640.14

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3.136.	Nonpriority creditor's name and mailing address AMERIMAX HOME PRODUCTS C/O OMNIMAX INTL 4455 RIVER GREEN PKWY DULUTH GA 30096 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,412.41
3.137.	Nonpriority creditor's name and mailing address AMIT R SHAH ATTN AMIT R SHAH 43938 SWIFT FOX DR CALIFORNIA MD 20619-7136 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$500.00
3.138.	Nonpriority creditor's name and mailing address AMSCAN INC FELICIA DELIA 47 ELIZABETH DRD CHESTER NY 10918-1367 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,132.03

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3.139.	Nonpriority creditor's name and mailing address AMTRAK JULIE BARBER RICE 2 FRONTAGE RD BOSTON MA 02118-2803 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$361.80
3.140.	Nonpriority creditor's name and mailing address AMTRAK GLENN SMITH 521 OLD WAUGH CHAPEL RD ODENTON MD 21113-2292 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,769.60
3.141.	Nonpriority creditor's name and mailing address AMTRAK MICHAEL GARRETT 1500 S LUMBER ST CHICAGO IL 60607-5211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,521.20

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3.142.	Nonpriority creditor's name and mailing address AMTRAK CHERYL GRENIER 6220 CHURCHMAN BYPASS INDIANAPOLIS IN 46203-6117 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,024.84
3.143.	Nonpriority creditor's name and mailing address AMTRAK MARREL WHITE 1401 W ST WASHINGTON DC 20018 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$520.00
3.144.	Nonpriority creditor's name and mailing address AMWARE KRISTI WERNER SECHRIST 19801 HOLLAND RD BROOK PARK OH 44142-1339 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$961.37

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3.145.	Nonpriority creditor's name and mailing address AMWARE ELIZABETH HENDERSON 19801 HOLLAND RD BROOK PARK OH 44142-1339 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,339.58
3.146.	Nonpriority creditor's name and mailing address AMWARE 19801 HOLLAND RD #A BROOK PARK OH 44142-1339 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$336.00
3.147.	Nonpriority creditor's name and mailing address ANAMET ELECTRICAL INC EDDIE TURNER 1000 BROADWAY AVE E MATTOON IL 61938-4674 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,275.09

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3.148.	Nonpriority creditor's name and mailing address ANCHOR AUTO GLASS & MIRROR 89 F HANCOCK STREET STONEHAM MO 02180 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$275.13
3.149.	Nonpriority creditor's name and mailing address ANDOVER HEALTHCARE RICHARD CAMPAIOLA 9 FANARAS DR SALISBURY MA 01952-1444 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,352.24
3.150.	Nonpriority creditor's name and mailing address ANDRE SMITH V NEW ENGLAND MOTOR FREIGHT INC ET AL DALE MARSH 212 AUTUMN LN LEHIGHTON PA 18235 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.151.	Nonpriority creditor's name and mailing address ANDREA AND DAVID SWICORD V NEW ENGLAND MOTOR FREIGHT INC ET AL JACEK BIS 8-38 CEDAR STREET FAIR LAWN NJ 07410 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.152.	Nonpriority creditor's name and mailing address ANDRES L MOSQUEIRA LAW OFFICES OF RICHARD A GREIFINGER RICHARD A GREIFINGER ESQ 17 ACADEMY ST NEWARK NJ 07102 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.153.	Nonpriority creditor's name and mailing address ANDRES MOSQUEIRA AND FOND DU LAC COLD STORAGE LLC LAW OFFICES OF LINDA S BAUMANN KENNETH M COURTNEY ESQ 50 MILLSTONE RD BUILDING 300 STE 140 EAST WINDSOR NJ 08520 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.154.	Nonpriority creditor's name and mailing address ANGELA EVANS ANDERSON MOSCHETTI AND TAFFANY PLLC PETER J MOSCHETTI JR ESQ 26 CENTURY HILL DR STE 206 LATHAM NY 12110 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.155.	Nonpriority creditor's name and mailing address ANGELO CAPUTOS FRESH MARKETS CESAR LOPEZ 520 E NORTH AVE CAROL STREAM IL 60188-2125 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,695.00
3.156.	Nonpriority creditor's name and mailing address ANGELONA*FREDERICK Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.157.	Nonpriority creditor's name and mailing address ANMAN AMIR AHMAD 6 CRIMSON CT LAKE IN THE HILL IL 60156 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.158.	Nonpriority creditor's name and mailing address ANN & HOPE INC MARIA CORREIA 1 ANN & HOPE WAY CUMBERLAND RI 02864-6918 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,613.50
3.159.	Nonpriority creditor's name and mailing address ANNA M CABRERA, ESQ 12 WESTCHESTER AVE, 1G WHITE PLAINS NY 10601 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$176.07

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3.160.	Nonpriority creditor's name and mailing address ANTHONY NEWELL JR CARGO CLAIMS DEPT 32 TRASK AVE BAYONNE NJ 07002 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$148.05
3.161.	Nonpriority creditor's name and mailing address APEX LOGISTICS, INC. I-71 NORTH AVENUE EAST ELIZABETH NJ 07201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,434,925.67
3.162.	Nonpriority creditor's name and mailing address APEX MATERIAL HANDLING CORP 391 CHARLES COURT WEST CHICAGO IL 60185 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$648.18

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3.163.	Nonpriority creditor's name and mailing address APPALACHIAN BREWING COMPANY % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.164.	Nonpriority creditor's name and mailing address APPALACHIAN POWER -AEP PO BOX 371496 PITTSBURGH PA 15250-7496 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$647.18
3.165.	Nonpriority creditor's name and mailing address APPLIED POLYMER SERVICES MICHAEL BARR 150 SCHMITT BLVD FARMINGDALE NY 11735-1424 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$475.00

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3.166.	Nonpriority creditor's name and mailing address APPLIED PRODUCTS JO ANN DIMINO 6035 BAKER RD MINNETONKA MN 55345-5908 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,204.76
3.167.	Nonpriority creditor's name and mailing address APRIL TUCKER CEI 4850 E ST RD STE 220 TREVOSSE PA 19053 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.168.	Nonpriority creditor's name and mailing address ARAMARK UNIFORM & CAREER PO BOX 731676 DALLAS TX 75373-1676 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$76.51

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3.169.	Nonpriority creditor's name and mailing address ARAMARK UNIFORM SERVICES PO BOX 28050 NEW YORK NY 10087-8050 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,183.80
3.170.	Nonpriority creditor's name and mailing address ARAMEX NEW YORK LTD SHAZEENA ALLI 182-25 150TH AVE JAMAICA NY 11413-4010 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,935.12
3.171.	Nonpriority creditor's name and mailing address ARBELLA INSURANCE LYNN BOVA PO BOX 699195 QUINCY MA 02269 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.172.	Nonpriority creditor's name and mailing address ARC EARLEEN RENTZ WAREHOUSE MANAGER 601 WADE BLVD MILLVILLE NJ 08332 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.173.	Nonpriority creditor's name and mailing address ARCH INSURANCE COMPANY ATT: TREASURY/COLLATERAL DEPT HARBORSIDE-3 Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WORKERS' COMPENSATION PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$146,943.00
3.174.	Nonpriority creditor's name and mailing address ARCH INSURANCE COMPANY ATT: TREASURY/COLLATERAL DEPT HARBORSIDE-3 210 HUDSON ST., SUITE 300 JERSEY CITY NJ 07311-1107 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.175.	Nonpriority creditor's name and mailing address ARCO STEEL COMPANY PO BOX 5276 HILLSIDE NJ 07205 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$20,801.00
3.176.	Nonpriority creditor's name and mailing address ARCTIC COOLERS 520 FELLOWSHIP ROAD SUITE E-501 MOUNT LAUREL NJ 08054 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$95.80
3.177.	Nonpriority creditor's name and mailing address ARETT SALES REBECCA MORGAN 9285 COMMERCE HWY PENNSAUKEN NJ 08110-1201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,468.23

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3.178.	Nonpriority creditor's name and mailing address ARETT SALES REBECCA MORGAN 9285 COMMERCE HWY PENNSAUKEN NJ 08110-1201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,215.15
3.179.	Nonpriority creditor's name and mailing address ARGOS EXPRESS LTD JAVIER VILLAO 147-27 175TH ST STE 1B JAMAICA NY 11434-5419 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,818.28
3.180.	Nonpriority creditor's name and mailing address ARIEL CONDE PLERQUI CLAIMS DEPT VILLA BLANCA ACERINA 2 CAGUAS PR 00725 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$420.66

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3.181.	Nonpriority creditor's name and mailing address ARIENS COMPANY % REDWOOD SCS 1765 N ELSTON AVE CHICAGO IL 60642-1501 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,906.01
3.182.	Nonpriority creditor's name and mailing address ARIZAGA*JORGE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.183.	Nonpriority creditor's name and mailing address ARLEN W. BLAKEMAN 2000 SUBTRUST U/W/O JON SHEVELL 1-71 NORTH AVENUE EAST ELIZABETH NJ 07201 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INSIDER PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$67,340.00

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3.184.	Nonpriority creditor's name and mailing address ARMALY BRANDS SUSAN TELEP PO BOX 611 WALLED LAKE MI 48390-0611 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,778.60
3.185.	Nonpriority creditor's name and mailing address ARMALY BRANDS SUSAN TELEP PO BOX 611 WALLED LAKE MI 48390-0611 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$247.28
3.186.	Nonpriority creditor's name and mailing address ARMSTEAD*JEFFREY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.187.	Nonpriority creditor's name and mailing address ARMSTRONG FLOORING % DM TRANSPORTATION PO BOX 621 BOYERTOWN PA 19512-0621 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,591.26
3.188.	Nonpriority creditor's name and mailing address ARMSTRONG FLOORING C/O DM TRANSPORTATION PO BOX 621 BOYERTOWN PA 19512-0621 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$441.81
3.189.	Nonpriority creditor's name and mailing address ARNOLD INDUSTRIAL EQUIPMENT & SERVICE, INC. 1025 MT. READ BOULEVARD ROCHESTER NY 14606 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$320.30

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3.190.	Nonpriority creditor's name and mailing address ARROW SECURITY CO, INC P O BOX 1250 SPRINGFIELD MA 01101 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,697.92
3.191.	Nonpriority creditor's name and mailing address ART & FRAME SOURCE INC JEAN COOK 4251 34TH ST N SAINT PETERSBURG FL 33714-3707 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,606.14
3.192.	Nonpriority creditor's name and mailing address ARTELLE KAIGLERHALL V NEW ENGLAND MOTOR FREIGHT INC ET AL THOMAS DEPASQUALE 6874 CR 50 ROME NY 13440 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.193.	Nonpriority creditor's name and mailing address ARTHUR W BROWN MFG PHILIP SABATINO 49-1 EAST INDUSTRY CT DEER PARK NY 11729 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$567.00
3.194.	Nonpriority creditor's name and mailing address ARTSKILLS BRIDGET DONATO 3935 RABOLD CIRCLE S BETHLEHEM PA 18020-8988 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,552.00
3.195.	Nonpriority creditor's name and mailing address ARTSONA USA INC 1826 WILLIAM PENN WAY LANCASTER PA 17607-6711 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,430.04

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3.196.	Nonpriority creditor's name and mailing address ARTURO BARRERA CRESPO V NEW ENGLAND MOTOR FREIGHT INC ET AL JOSEPH CLEGGETT 10 MAPLE ST BROOKFIELD MA 01506 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.197.	Nonpriority creditor's name and mailing address ARTURO PAEZ BOYLE SHAUGHNESSY LAW PC MICHAEL D DEMEOLA ESQ ONE NORTH BROADWAY STE 410 WHITE PLAINS NY 10606 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.198.	Nonpriority creditor's name and mailing address ARUNDEL INSPECTION SERVICES 7666 BALTIMORE ANNAPOLIS BLVD. GLEN BURNIE MD 21060 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00

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3.199.	Nonpriority creditor's name and mailing address ASAD ABIDI CARGO CLAIMS 919 BROMTON DR WESTBURY NY 11540 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$330.70
3.200.	Nonpriority creditor's name and mailing address ASD LIGHTING KIM GREENE 120 SHAWMUT RD CANTON MA 02021-1414 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,723.80
3.201.	Nonpriority creditor's name and mailing address ASHLAND TATIANA SWAIN 5200 BLAZER PKWY DUBLIN OH 43017-3309 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,625.71

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3.202.	Nonpriority creditor's name and mailing address ASHLAND INC EH&S TRANS DEPT 5200 BLAZER PKWY DUBLIN OH 43017-3309 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.203.	Nonpriority creditor's name and mailing address ASHLAND INC TRANS AUDIT STE 2D 11 MARSHALL RD WAPPINGERS FALLS NY 12590-4132 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$565.55
3.204.	Nonpriority creditor's name and mailing address ASSOCIATED BUYERS SHAWN ST PIERRE PO BOX 399 BARRINGTON NH 03825-0399 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$233.82

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3.205.	Nonpriority creditor's name and mailing address ASSOCIATED TRUCK PARTS 1075 EAST PHILADELPHIA AVE GILBERTSVILLE PA 19525 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,833.24
3.206.	Nonpriority creditor's name and mailing address ATI USA SOUTH, LLC ATTN: CARLOS HERMO 11700 NW 36TH AVENUE HIALEAH FL 33167 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TENANT SECURITY DEPOSIT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$20,000.00
3.207.	Nonpriority creditor's name and mailing address ATKORE INTERNATIONAL STEVEN LEADBEATER 958 US ROUTE 11 S KIRKWOOD NY 13795-1649 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$121.90

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3.208.	Nonpriority creditor's name and mailing address ATLANTIC IMPORT & EXPORT JOHN ZAREVA 220 MEISTER AVE BRANCBURG NJ 08876-6045 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,362.06
3.209.	Nonpriority creditor's name and mailing address ATLANTIC PLYWOOD P O BOX 380 GUILDERLAND CENTER NY 12085-0380 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$65.00
3.210.	Nonpriority creditor's name and mailing address ATLANTIC TIRE, INC 48 ARMENTO ST JOHNSTON RI 02919 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$375.00

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3.211.	Nonpriority creditor's name and mailing address ATLAS COPCO COMPTec PAUL BURDICK 46 SCHOOL RD VOORHEESVILLE NY 12186-9608 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,470.00
3.212.	Nonpriority creditor's name and mailing address ATLSTAR PO BOX 436 FISHKILL NY 12524 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$99.78
3.213.	Nonpriority creditor's name and mailing address AUPrix ANGELICA DOMINGO 240 S CEDROS AVE STE 200 SOLANA BEACH CA 92075-2084 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,258.09

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3.214.	Nonpriority creditor's name and mailing address AUSTRADE INC DENISE GAGLIA 3309 NORTHLAKE BLVD STE 201 PALM BEACH GARDENS FL 33420 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$960.65
3.215.	Nonpriority creditor's name and mailing address AUSTRADE INC SHELLEY HELLER 3309 NORTHLAKE BLVD STE 201 PALM BEACH GARDENS FL 33420 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,858.29
3.216.	Nonpriority creditor's name and mailing address AVENEL TRUCK EQUIPMENT P.O. BOX 167 AVENEL NJ 07001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,550.63

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3.217.	Nonpriority creditor's name and mailing address AVID MEDICAL % RIVERSIDE LOGISTICS PO BOX 7899 RICHMOND VA 23231-0399 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$504.00
3.218.	Nonpriority creditor's name and mailing address AVIVA INSURANCE CO OF CANADA 10 AVIVA WAY STE 100 MARKHAM ON L6G 0G1 CANADA Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.219.	Nonpriority creditor's name and mailing address AWE TUNING %TRANSLOGISTICS 321 N FURNACE ST BIRDSBORO PA 19508-2057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,840.25

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3.220.	Nonpriority creditor's name and mailing address B & L TOWING 500 MILIK ST CARTERET NJ 07008 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,886.00
3.221.	Nonpriority creditor's name and mailing address B E ACTIVE CORP 41 WEST 33RD STREET NEW YORK NY 10001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$455.51
3.222.	Nonpriority creditor's name and mailing address B&S LOGISTICS AMERICA JUSTIN RIN 147-32 FARMERS BLVD JAMAICA NY 11434-5218 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$864.04

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3.223.	Nonpriority creditor's name and mailing address BACKHAUL%LATHAM POOL PRODUCTS KEVIN M SIGNORE 1 VIRGINIA AVE STE 400 INDIANAPOLIS IN 46204-3644 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,848.47
3.224.	Nonpriority creditor's name and mailing address BACTOLAC PHARMACEUTICAL CLAIMS DEPT 7 OSER AVE HAUPPAUGE NY 11788-3811 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$952.00
3.225.	Nonpriority creditor's name and mailing address BAILEYS AUTOBODY LLC 16818 US RT 15 ALLENWOOD PA 17810 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,420.00

Debtor **New England Motor Freight, Inc.**

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3.226.	Nonpriority creditor's name and mailing address BAKER COMPANY KEN WAKEFIELD 161 GATEHOUSE ROAD SANFORD ME 04073-2482 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$527.83
3.227.	Nonpriority creditor's name and mailing address BAKER COMPANY KEN WAKEFIELD 161 GATEHOUSE RD SANFORD ME 04073-2482 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,250.00
3.228.	Nonpriority creditor's name and mailing address BAKER*JOHN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.229.	Nonpriority creditor's name and mailing address BALDWIN AND LYONS 111 CONGRESSIONAL BLVD STE 500 CARMEL IN 46032 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.230.	Nonpriority creditor's name and mailing address BALDWIN RICHARDSON FOODS % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,919.51
3.231.	Nonpriority creditor's name and mailing address BALLATO LAW FIRM 3721 WESTERRE PKWY #A HENRICO VA 23233 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$139.19

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3.232.	Nonpriority creditor's name and mailing address BANGOR WATER DISTRICT PO BOX 1129 BANGOR ME 04402-1129 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$71.13
3.233.	Nonpriority creditor's name and mailing address BANNER DOORS CORP 550 POND ST PO BOX 3124 WOONSOCKET RI 02895 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$222.34
3.234.	Nonpriority creditor's name and mailing address BANYAN INTERNATIONAL CHERYL LZU 24 CENTRAL DR FARMINGDALE NY 11735 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$943.92

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3.235.	Nonpriority creditor's name and mailing address BARCLAY BRAND FERDON PO BOX 341 SOUTH PLAINFIELD NJ 07080 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,601.94
3.236.	Nonpriority creditor's name and mailing address BARCODING, INC ATTN: A/R DEPT 2220 BOSTON ST ,2ND FLOOR BALTIMORE MD 21231 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$308.42
3.237.	Nonpriority creditor's name and mailing address BARGAIN OUTLET 20 PILLA DR. WARWICK RI 02886 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,452.00

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3.238.	Nonpriority creditor's name and mailing address BARGAINHUNTER1000 LLC SCOTT LANE 317 W BROAD ST, STE 1 BETHLEHEM PA 18018 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$151.80
3.239.	Nonpriority creditor's name and mailing address BARLUP*RICHARD Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.240.	Nonpriority creditor's name and mailing address BARONSKI*ANDREW Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.241.	Nonpriority creditor's name and mailing address BARREVELD % WORLDWIDE EXPRESS 2323 VICTORY AVE STE 1600 DALLAS TX 75219-7657 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,560.58
3.242.	Nonpriority creditor's name and mailing address BARRY*HASSAME Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.243.	Nonpriority creditor's name and mailing address BASE CORP 25 MIDDLESEX ESSEX TRPK ISELIN NJ 08830 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.244.	Nonpriority creditor's name and mailing address BASF CORP CLAIMS DEPT 1900 BRANNAN RD STE 300 MCDONOUGH GA 30253-4324 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$316.84
3.245.	Nonpriority creditor's name and mailing address BASF CORPORATION CLAIMS DEPT 1900 BRANNAN RD STE 300 MCDONOUGH GA 30253-4324 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,115.04
3.246.	Nonpriority creditor's name and mailing address BASF CORPORATION C/O CASS INFO SYSTEMS JAY CONFER IN SHIPPING P O BOX 67 SAINT LOUIS MO 63166-0067 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$212.64

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3.247.	Nonpriority creditor's name and mailing address BASF CORPORATION % TRANS AUDIT INC 11 MARSHALL ROAD #2D WAPPINGERS FALLS NY 12590-4132 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$212.64
3.248.	Nonpriority creditor's name and mailing address BASILIERE*DAVID Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.249.	Nonpriority creditor's name and mailing address BATTENKILL FIBERS PHANTOM LABORATORY % ECHO GLOBAL 600 W CHICAGO AVE STE 725 GREENWICH NY 12834-3212 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$393.02

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3.250.	Nonpriority creditor's name and mailing address BAY INSULATION OF PA TRISTA SCHLIES PO BOX 9229 GREEN BAY WI 54308-9229 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.251.	Nonpriority creditor's name and mailing address BAY STATE ELEVATOR COMPANY, INC PO BOX 5 DALTON MA 01227-0005 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$208.66
3.252.	Nonpriority creditor's name and mailing address BAYOU METAL SUPPLY MATTHEW HARDING 60042 CABIRAN RD SLIDELL LA 70460-4213 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,311.00

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3.253.	Nonpriority creditor's name and mailing address BAYSTATE POOL SUPPLY RACHEL WILLEY 26 SMITH PLACE CAMBRIDGE MA 02138-1008 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$925.00
3.254.	Nonpriority creditor's name and mailing address BAYSTATE WINE & SPIRITS MICHAEL BARANOWSKI 40 ROBBIE RD UNIT A AVON MA 02322-1162 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$74.00
3.255.	Nonpriority creditor's name and mailing address BDP INTERNATIONAL CAROLINE DOUGHERTY 510 WALNUT ST PHILADELPHIA PA 19106-3619 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$434.56

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3.256.	Nonpriority creditor's name and mailing address BDP INTERNATIONAL JOHN NASK 100 CONCORD RD ASTON PA 19014-2908 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$623.00
3.257.	Nonpriority creditor's name and mailing address BDP INTERNATIONAL TYLER HULL 200 METROPLEX DR STE 285 EDISON NJ 08817-2601 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,671.75
3.258.	Nonpriority creditor's name and mailing address BEAM MACK MINDY MORSE 22048 SALMON RUN RD WATERTOWN NY 13601 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8.78

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3.259.	Nonpriority creditor's name and mailing address BED BATH & BEYOND CLAIMS DEPT 700 LIBERTY AVE UNION NJ 07083-8107 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,903.31
3.260.	Nonpriority creditor's name and mailing address BED BATH & BEYOND P O BOX 9282 OLD BETHPAGE NY 11804 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,810.06
3.261.	Nonpriority creditor's name and mailing address BED BATH & BEYOND CLAIMS DEPT 700 LIBERTY AVE UNION NJ 07083-8107 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$488.13

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3.262.	Nonpriority creditor's name and mailing address BELCAM INC KRISTIN TAYLOR 27 MONTGOMERY STREET ROUSES POINT NY 12979-1041 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$555.00
3.263.	Nonpriority creditor's name and mailing address BELGRADE PARTS & SERVICE, INC 2748 E BUTLER STREET PHILADELPHIA PA 19137 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,028.41
3.264.	Nonpriority creditor's name and mailing address BELLVIEW PUMP SALES & SERVICE 4654 LEHIGH DR WALNUTPORT PA 18088 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$688.70

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3.265.	Nonpriority creditor's name and mailing address BELMONT & MINNESOTA TERMINAL PARTNERSHIP 8463 CASTLEWOOD DRIVE INDIANAPOLIS IN 46250 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$38,380.90
3.266.	Nonpriority creditor's name and mailing address BELTS INTERMODAL CORPORATION PEGGY ZULKOWSKI 1820 PORTAL ST BALTIMORE MD 21224-6512 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,907.50
3.267.	Nonpriority creditor's name and mailing address BELTWAY INTL TRUCKS.,INC 1800 SULPHUR SPRINGS ROAD BALTIMORE MD 21227 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$121.85

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3.268.	Nonpriority creditor's name and mailing address BENCHMARK TRADE SOLUTIONS GRAEME THOMPSON 3615 LAIRD RD UNIT 20 MISSISSAUGA ON L5L5Z8 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,341.00
3.269.	Nonpriority creditor's name and mailing address BENEDICTO SORTO COHEN & WOLF PC JOSEPH G. WALSH 158 DEER HILL AVENUE DANBURY CT 06810 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.270.	Nonpriority creditor's name and mailing address BENEDICTO SORTO V. FREEDIE THEODORE CARROLL ET AL. SOLIMENE & SECONDO, LLP, ELYCIA D. SOLIMENE ATTORNEY FOR THE DEFENDANT 1501 EAST MAIN STREET SUITE 204 MERIDEN CT 06450 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.271.	Nonpriority creditor's name and mailing address BENFIELD ELECTRIC STEVE GREBE 400 HICKORY DR ABERDEEN MD 21001-3644 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,887.67
3.272.	Nonpriority creditor's name and mailing address BENJAMIN DI NAPOLI ELIZABETH 6 KRULL DR JACKSON NJ 08527 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,504.34
3.273.	Nonpriority creditor's name and mailing address BENNY GARCIA HERRERA SO PLAINFIELD ** SAFETY** 130 THIRD ST APT 1 NEWBURGH NY 12550 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$343.00

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3.274.	Nonpriority creditor's name and mailing address BENTLEY SAMUELS WALLERSTEIN AND ASSOCIATES PC HEDVA WELLERSTEIN ESQ 6045 ELIOT AVE MASPETH NY 11378 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.275.	Nonpriority creditor's name and mailing address BERK ENTERPRISES SHIRLEY SHELLY 1554 THOMAS RD SE WARREN OH 44484-5119 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$763.34
3.276.	Nonpriority creditor's name and mailing address BERK ENTERPRISES JAMES LEWIS JR 1554 THOMAS RD SE WARREN OH 44484-5119 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,232.00

Debtor **New England Motor Freight, Inc.**

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3.277.	Nonpriority creditor's name and mailing address BERK ENTERPRISES SHIRLEY SHELLEY 1554 THOMAS RD SE WARREN OH 44484-5119 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$83.45
3.278.	Nonpriority creditor's name and mailing address BERNARD LABORATORIES % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,684.80
3.279.	Nonpriority creditor's name and mailing address BERRY GLOBAL INC F/K/A BERRY PLASTICS CORP 101 OAKLEY ST, POB 959 EVANSVILLE IN 47706 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,373.24

Debtor **New England Motor Freight, Inc.**

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3.280.	Nonpriority creditor's name and mailing address BERRY PLASTICS CORPORATION FAWNYA YORK 20 ELMWOOD AVE MOUNTAIN TOP PA 18707-2100 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,675.80
3.281.	Nonpriority creditor's name and mailing address BEST NEST INC ZACHARY KAPPESSER 4000 MC MANN RD CINCINNATI OH 45245-2048 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$405.00
3.282.	Nonpriority creditor's name and mailing address BEST TILE LISA FISHER 911 BELMONT AVE SPRINGFIELD MA 01108-2465 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$233.63

Debtor **New England Motor Freight, Inc.**

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3.283.	Nonpriority creditor's name and mailing address BEST TILE OF DEDHAM LISA FISHER 25 MC NEIL WAY DEDHAM MA 02026-2650 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$793.76
3.284.	Nonpriority creditor's name and mailing address BESTPASS, INC 555 PATROON CREEK BLVD LOCKBOX 941 ALBANY NY 12206 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$378,434.46
3.285.	Nonpriority creditor's name and mailing address BETHANY HELLER ATTORNEY FOR THE PLAINTIFF MUNLEY LAW 227 PENN AVE SCRANTON PA 18503 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.286.	Nonpriority creditor's name and mailing address BETHANY HELLER V NEW ENGLAND MOTOR FREIGHT INC ET AL WILLIAM YOUNG 6219 WARD RD WHEATFIELD NY 14132 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.287.	Nonpriority creditor's name and mailing address BETHEL PRAYER MINISTRIES INTL AND BYRON BAAH WILLIAMS DONOHUE LAW FIRM PC ROBERT D DONOHUE ESQ 745 5TH AVE 5TH FLOOR NEW YORK NY 10151 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.288.	Nonpriority creditor's name and mailing address BETTER HOME PLASTICS FRANK LEE 439 COMMERCIAL AVE PALISADES PARK NJ 07650-1226 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$228.00

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3.289.	Nonpriority creditor's name and mailing address BFG SUPPLY CO % AFS LOGISTICS PO BOX 18170 SHREVEPORT LA 71138-1170 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$402.26
3.290.	Nonpriority creditor's name and mailing address BFG SUPPLY CO C/O AFS LOGISTICS PO BOX 18170 SHREVEPORT LA 71138-1170 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$71.72
3.291.	Nonpriority creditor's name and mailing address BGE PO BOX 13070 PHILADELPHIA PA 19101-3070 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,459.36

Debtor **New England Motor Freight, Inc.**

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3.292.	Nonpriority creditor's name and mailing address BIERMAAS*CHRISTOPHER Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.293.	Nonpriority creditor's name and mailing address BIERMANN SERVICE 77 FULLER ROAD CHICOPEE MA 01020-3705 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$481.25
3.294.	Nonpriority creditor's name and mailing address BIG BLUE BUG RICH 161 O'CONNEL ST PROVIDENCE RI 02905 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.295.	Nonpriority creditor's name and mailing address BIG JS TOWING & RECOVERY LLC 737 BAYS DRIVE CHARLESTON WV 25306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,809.66
3.296.	Nonpriority creditor's name and mailing address BIRATH*LAWRENCE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.297.	Nonpriority creditor's name and mailing address BISCO IND GEOFFTUMANG 1500 LAKEVIEW LOOP ANAHEIM CA 92807 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.298.	Nonpriority creditor's name and mailing address BISCOTTI BROTHERS BARBARA HOAK 5142 STATE ROUTE 30 STE 190 GREENSBURG PA 15605-2500 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$529.53
3.299.	Nonpriority creditor's name and mailing address BITTO*STEPHEN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.300.	Nonpriority creditor's name and mailing address BIZERBA SOLUTIONS ANN MARIE FERRANTE 5200 ANTHONY RD SANDSTON VA 23150-1929 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,166.16

Debtor **New England Motor Freight, Inc.**

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3.301.	Nonpriority creditor's name and mailing address BJORKMAN INDUSTRIAL POWER CORP 70 FINNELL DRIVE WEYMOUTH MA 02188 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$262.50
3.302.	Nonpriority creditor's name and mailing address BJS WHOLESALE CLUB RYAN GOVE 869 QUAKER HWY UXBRIDGE MA 01569-2252 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25,249.56
3.303.	Nonpriority creditor's name and mailing address BJ'S WHOLESALE CLUB, INC ATTN:: FREIGHT ACCOUNTING P.O. BOX 3755 BOSTON MA 02241-3755 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,655.35

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3.304.	Nonpriority creditor's name and mailing address BLUE AIR ONE 508 W ELIZABETH AVE LINDEN NJ 07036 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$880.60
3.305.	Nonpriority creditor's name and mailing address BLUE COAST BEVERAGES JOCELYN LAROCQUE 32 SCOTLAND BLVD BRIDGEWATER MA 02324-4302 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$300.00
3.306.	Nonpriority creditor's name and mailing address BLUE GRACE LOGISTICS ALLY RUCKER 2846 S FALKENBURG RD RIVERVIEW FL 33568-2517 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,307.69

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3.307.	Nonpriority creditor's name and mailing address BLUE GRACE LOGISTICS NATHALI NAJERA 2846 S FALKENBURG RD RIVERVIEW FL 33568 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,186.17
3.308.	Nonpriority creditor's name and mailing address BLUE RIDGE HYDROPONICS & HOME BREWING CLAIMDS DEPT 5327 WILLIAMSON RD STE D ROANOKE VA 24012-1400 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$275.80
3.309.	Nonpriority creditor's name and mailing address BLUE SPRING IMPORTS VICTOR LARINE 10500 NW 26TH ST MIAMI FL 33172-2158 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,091.00

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3.310.	Nonpriority creditor's name and mailing address BLUEGRACE ATTN: ACCTS PAYABLE SARAH PEASE A/P 2846 S FALKENBURG RD RIVERVIEW FL 33568 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$59.77
3.311.	Nonpriority creditor's name and mailing address BLUEGRACE LOGISTICS NATHALI NAJERA 2846 S FALKENBURG RD RIVERVIEW FL 33568-1619 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$299.00
3.312.	Nonpriority creditor's name and mailing address BNSF LOGISTICS P.O.BOX 176 VERSAILLES OH 45380 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$231.60

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3.313.	Nonpriority creditor's name and mailing address BNX SHIPPING DANNY KIM 147-32 FARMERS BLVD JAMAICA NY 11434-5218 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,016.09
3.314.	Nonpriority creditor's name and mailing address BOB SUMEREL TIRE CO, INC PO BOX 633096 CINCINNATI OH 45263-3096 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.315.	Nonpriority creditor's name and mailing address BOBS STORES DATA2LOGISTICS PO BOX 6105 FOR MYERS FL 33906-1050 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,412.51

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3.316.	Nonpriority creditor's name and mailing address BOBS STORES % DATA2LOGISTICS PO BOX 6105 FOR MYERS FL 33906-1050 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,412.51
3.317.	Nonpriority creditor's name and mailing address BOOTS AND HANKS TOWING & REC 1500 N KEYSER AVE SCRANTON PA 18504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,061.00
3.318.	Nonpriority creditor's name and mailing address BORGHI*BRETT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.319.	Nonpriority creditor's name and mailing address BOROUGH OF PITCAIRN ANNETTE DIETZ BORO MG 582 SIXTH ST PITCAIRN PA 15140 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.320.	Nonpriority creditor's name and mailing address BORTEK INDUSTRIES, INC 4713 OLD GETTYSBURG ROAD MECHANICSBURG PA 17055 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$67.77
3.321.	Nonpriority creditor's name and mailing address BOSHART IND. INC. BRAD LICHTY PO BOX 310 MILVERTON ON N0K1M06505 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$47.99

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3.322.	Nonpriority creditor's name and mailing address BOSS PRESICION LTD STACY SMITH 2440 S UNION ST SPENCERPORT NY 14559-2230 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,966.16
3.323.	Nonpriority creditor's name and mailing address BOSTON AMERICA CORPORATION CLAIMS DEPT 55 SIXTH RD STE 8 WOBURN MA 01801-1746 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$180.00
3.324.	Nonpriority creditor's name and mailing address BOUCHER CLEANING SERVICES 57 CURTIS AVENUE BURLINGTON VT 05401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$975.00

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3.325.	Nonpriority creditor's name and mailing address BOWERS*GENE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.326.	Nonpriority creditor's name and mailing address BOWLEY*RUSSELL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.327.	Nonpriority creditor's name and mailing address BOWMAN MURRAY FULK GROUP INC NAPA AUTO PARTS 601 W JOHN STREET MARTINSBURG WV 25401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$45.54

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.328.	Nonpriority creditor's name and mailing address BOX PARTNERS LLC CHRISSY CODUTO 2650 GALVIN DRIVE ELGIN IL 60124-7893 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,049.83
3.329.	Nonpriority creditor's name and mailing address BOX PARTNERS LLC LOGISTICS@BOXPARTNERS.CO 2650 GALVIN DRIVE ELGIN IL 60124-7893 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$113.31
3.330.	Nonpriority creditor's name and mailing address BOX PARTNERS, LLC CHRISSY CODUTO 2650 GALVIN DRIVE ELGIN IL 60124-7893 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$309.05

Debtor **New England Motor Freight, Inc.**

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3.331.	Nonpriority creditor's name and mailing address BOYER'S FOOD MARKET 1165 CENTRE TPK ORWIGSBURG PA 17961 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.332.	Nonpriority creditor's name and mailing address BOYKO'S PETROLEUM SERVICE INC 4171 CHESTNUT STREET WHITEHALL PA 18052-2001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$559.68
3.333.	Nonpriority creditor's name and mailing address BOYLE'S MOTOR SALES, INC 2955 STRUNK ROAD JAMESTOWN NY 14701 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,247.31

Debtor **New England Motor Freight, Inc.**

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3.334.	Nonpriority creditor's name and mailing address BRACH EICHLER, LLC 101 EISENHOWER PARKWAY ROSELAND NJ 07068 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,976.00
3.335.	Nonpriority creditor's name and mailing address BRANDALYUM WASHBURN 14 BLUEBIRD TIER FORT EDWARD NY 12828 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.336.	Nonpriority creditor's name and mailing address BREEZY POINT TRUCK REPAIR, INC PO BOX 1298 STRATFORD CT 06615 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$422.74

Debtor **New England Motor Freight, Inc.**

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3.337.	Nonpriority creditor's name and mailing address BRETT WILDERMAN V NEW ENGLAND MOTOR FREIGHT INC ET AL MATHEW A WILLIAMS 27401 WESTOWN BLVD WESTLAKE OH 44145 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.338.	Nonpriority creditor's name and mailing address BRIANNA MAYES JESSICA FORBES ALILAH BALDWIN JOURDIN SENIOR ATT FOR THE DEFENDENTS WEBER AND RUBANO LLC LOUIS RUBANO 401 CENTER ST WALLINGFORD CT 06492 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.339.	Nonpriority creditor's name and mailing address BRICKSTOP CORPORATION ROBERT JOHNSTON 205 CHAMPAGNE DR STE 3A TORONTO ON M3J2C6 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$364.27

Debtor **New England Motor Freight, Inc.**

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3.340.	Nonpriority creditor's name and mailing address BRIDGESTONE AMERICAS TIRE OPERATIONS LLC P O BOX 73418 CHICAGO IL 60673-7418 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$157,754.05
3.341.	Nonpriority creditor's name and mailing address BRIDGET LAVELLE & CIOCCA COLLISION CENTER 8015 ALLENTOWN BLVD HARRISBURG PA 17112 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,968.97
3.342.	Nonpriority creditor's name and mailing address BRIGGS MICHELLE BEARD 1931 NORMAN DRIVE WAUKEGAN IL 60079 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,132.04

Debtor **New England Motor Freight, Inc.**

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3.343.	Nonpriority creditor's name and mailing address BRISTOL MYERS SQUIBB % TRANSAVER LLC 108 WASHINGTON ST MANLIUS NY 13104-1913 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,655.60
3.344.	Nonpriority creditor's name and mailing address BRISTOL TRANSPORT, INC 1 W LAKE STREET NORTHLAKE IL 60164 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,640.00
3.345.	Nonpriority creditor's name and mailing address BRITTANY WARREN PARKER WAICHMAN LLP 6 HARBOR PARK DR PORT WASHINGTON NY 11050 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.346.	Nonpriority creditor's name and mailing address BROADSPIRE CLAIM 188818186-001 1503 LBJ FWY STE 600 DALLAS TX 75234 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.347.	Nonpriority creditor's name and mailing address BRODER BROS 365 WEST PASSAIC ST INTELLAUDIT STE 235 ROCHELLE PARK NJ 07662-3017 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1.00
3.348.	Nonpriority creditor's name and mailing address BROTHERS INTERNATIONAL FOOD MAUREEN BORELLI 1175 LEXINGTON AVE ROCHESTER NY 14606-2903 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$100.80

Debtor **New England Motor Freight, Inc.**

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3.349.	Nonpriority creditor's name and mailing address BROTHERS INTERNATIONAL FOOD CORP MAUREEN BORELLI 1175 LEXINGTON AVE ROCHESTER NY 14606-2903 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,857.00
3.350.	Nonpriority creditor's name and mailing address BROTHERS INTERNATIONAL FOOD CORP ALICIA HOLMES 1175 LEXINGTON AVE ROCHESTER NY 14606-2903 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,974.15
3.351.	Nonpriority creditor's name and mailing address BROWN*TRAIMAR Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.352.	Nonpriority creditor's name and mailing address BRUCE J ROSYAK 2541 SCOTCH HILL RD #1 NORTH HUNTINGDON PA 15642 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.353.	Nonpriority creditor's name and mailing address BRUMFIELD*LARRY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.354.	Nonpriority creditor's name and mailing address BRUNKEN MANUFACTURING HUNTER HART 4205 W JACKSON ST PENSACOLA FL 32505-7233 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,656.00

Debtor **New England Motor Freight, Inc.**

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3.355.	Nonpriority creditor's name and mailing address BRUNO'S AUTOMOTIVE, INC 101 FIFTH AVENUE BAY SHORE NY 11706 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,199.68
3.356.	Nonpriority creditor's name and mailing address BSH HOME APPLIANCES TRANSAUDIT STE 2D 11 MARSHALL RD WAPPINGERS FALLS NY 12590-4132 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$157.92
3.357.	Nonpriority creditor's name and mailing address BSP TRANS 2500 LIBERTY DR P.O. BOX 1387 LONDONDERRY NH 03053-1387 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$22,942.83

Debtor **New England Motor Freight, Inc.**

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3.358.	Nonpriority creditor's name and mailing address BUNZL SCOTIA COLLEEN MOON 702 POTENTIAL PKWY SCOTIA NY 12302-1011 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$45.39
3.359.	Nonpriority creditor's name and mailing address BURKE DISTRIBUTORS RON TUCKER 89 TEED DR RANDOLPH MA 02368-4201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$333.30
3.360.	Nonpriority creditor's name and mailing address BUTTERNUT MOUNTAIN FARM ADAM DARLING 37 INDUSTRIAL PARK DR MORRISVILLE VT 05661-8533 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$309.60

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.361.	Nonpriority creditor's name and mailing address BUY-WISE AUTO PARTS 2091 SPRINGFIELD AVE VAUX HALL (UNION) NJ 07088 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$255.32
3.362.	Nonpriority creditor's name and mailing address BWC STATE INSURANCE FUND OHIO BUREAU OF WORKERS COMPENSATION PO BOX 89492 CLEVELAND OH 44101-6492 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$149,071.02
3.363.	Nonpriority creditor's name and mailing address BYRON E NAJERA OSORIO AND XIOMARA MENDOZA LOPEZ ATTY FOR THE PLAINTIFF'S RESIN AND ROSENSTEIN LLP CRAIG ROSENSTEIN 6200 BALTIMORE AVE STE 400 RIVERDALE PARK MD 20737 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.364.	Nonpriority creditor's name and mailing address C H ROBINSON 14800 CHARLSON RD EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$100.05
3.365.	Nonpriority creditor's name and mailing address C&C LIFT TRUCK 30 PARKWAY PLACE EDISON NJ 08837 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,841.11
3.366.	Nonpriority creditor's name and mailing address C&S WHOLESALE GROCERS, INC PO BOX 414270 BOSTON MA 02241-4270 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,166.09

Debtor **New England Motor Freight, Inc.**

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3.367.	Nonpriority creditor's name and mailing address CABLEVISION LIGHTPATH INC PO BOX 360111 PITTSBURGH PA 15251-6111 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,445.95
3.368.	Nonpriority creditor's name and mailing address CAC ASSOCIATES INC RYAN PETRYSHAK 136 LAZOR RD EBENSBURG PA 15931-3924 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,222.05
3.369.	Nonpriority creditor's name and mailing address CAC ASSOCIATES INC RYAN PERRYSHAK 136 LAZOR RD EBENSBURG PA 15931-3924 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$34.60

Debtor **New England Motor Freight, Inc.**

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3.370.	Nonpriority creditor's name and mailing address CALICO INDUSTRIES LAMONICA HERBST AND MANISCALCO LLP H HOLECEK AND M ROZEA ESQS 3305 JERUSALEM AVE STE 201 WANTAGH NY 11793 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.371.	Nonpriority creditor's name and mailing address CALISE & SONS BAKERY INC OLIVER CARDOSO 2 QUALITY DR LINCOLN RI 02865-4266 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$55.80
3.372.	Nonpriority creditor's name and mailing address CALUMET CARTON C/OWORLDWIDE LOGISTICS 1213 REMINGTON BLVD ROMEOVILLE IL 60446-6504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$41.00

Debtor **New England Motor Freight, Inc.**

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3.373.	Nonpriority creditor's name and mailing address CALUMET CARTON CO C/O WORLDWIDE LOGISTICS 1213 REMINGTON BLVD ROMEONVILLE IL 60446-6504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$41.90
3.374.	Nonpriority creditor's name and mailing address CAMBRIA MACK TRUCKS INC. PO BOX 34038 NEWARK NJ 0711890038 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,978.44
3.375.	Nonpriority creditor's name and mailing address CAMEROTA TRUCK PARTS. PO BOX 1134 ENFIELD CT 06083-1134 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,986.28

Debtor **New England Motor Freight, Inc.**

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3.376.	Nonpriority creditor's name and mailing address CAMP AUTO & TRUCK PARTS INC 9 WHITMORE AVE WAYNE NJ 07470 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$600.00
3.377.	Nonpriority creditor's name and mailing address CANASTOTA VILLAGE COURT 205 S PETERBORO ST CANASTOTA NY 13032 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$243.00
3.378.	Nonpriority creditor's name and mailing address CAPE COD EXPRESS KATE HARDSOG 1 EXPRESS DRIVE WAREHAM MA 02571-5028 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,919.65

Debtor **New England Motor Freight, Inc.**

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3.379.	Nonpriority creditor's name and mailing address CAPITAL AUTO GLASS, INC 4270 WERTZVILLE ROAD ENOLA PA 17025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,125.00
3.380.	Nonpriority creditor's name and mailing address CAPITAL FOREST PRODUCTS JESICAN AMOS 107 GIBRALTAR AVE ANNAPOLIS MD 21401-3140 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.381.	Nonpriority creditor's name and mailing address CAPITAL ONE, N.A. 275 BROADHOLLOW RD MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: GUARANTEE OF EASTERN FREIGHTWAYS LOAN Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$0.00

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3.382.	Nonpriority creditor's name and mailing address CAPITAL ONE, N.A. 275 BROADHOLLOW RD MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LETTERS OF CREDIT Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$428,000.00
3.383.	Nonpriority creditor's name and mailing address CAPITAL TRANS LOGISTICS PO BOX 12497 NEWARK NJ 07101-3597 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,433.46
3.384.	Nonpriority creditor's name and mailing address CAPITAL TRANS SERVICES, INC ATTN: KIM GARNEAU P.O. BOX 248 WINDHAM NH 03087 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,689.21

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3.385.	Nonpriority creditor's name and mailing address CAPITAL TRANS SOLUTIONS, LLC 1915 VAUGHN ROAD KENNESAW GA 30144 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,756.97
3.386.	Nonpriority creditor's name and mailing address CAPITALAND TIRE MART INC 9 NORTHWAY LANE NORTH LATHAM NY 12110 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$343.50
3.387.	Nonpriority creditor's name and mailing address CARBON COUNTY AUTO PARTS LEHIGHTON NAPA 90 BLAKESLEE BOULEVARD E LEHIGHTON PA 18235 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$138.99

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3.388.	Nonpriority creditor's name and mailing address CARDINAL DIST 11 CENTENI PEABODY MA 01970 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.389.	Nonpriority creditor's name and mailing address CARDINAL TRANSPORTATION JENNIFER BELL 6209 MID RIVERS MALL DR STE 210 SAINT CHARLES MO 63304-1102 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$395.60
3.390.	Nonpriority creditor's name and mailing address CARGO PARTNER NETWORK RONNIE BALLIRAM 230-59 INTL AIRPORT CTR BLVD #C-240 SPRINGFIELD GARDENS NY 11413 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,972.77

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3.391.	Nonpriority creditor's name and mailing address CARGO PARTNER NETWORK SHABANA MAYWATTIE 230-59 INTL AIRPORT CTR BLVD #C-240 SPRINGFIELD GARDENS NY 11413 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,470.88
3.392.	Nonpriority creditor's name and mailing address CARGOLINE EXPRESS IWONA KIEDROWSKI 369 HAYNES WOOD DALE IL 60191-2614 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,922.05
3.393.	Nonpriority creditor's name and mailing address CARLOS AREVALO TROLMAN GLASER AND LICHTMAN PC DENNIS BELLOVIN ESQ 747 THIRD AVE NEW YORK NY 10017 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: DISMISSED LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.394.	Nonpriority creditor's name and mailing address CARLOS AREVALO V SHEA NASSAU SUFFOLK DELIVERY CORP LAW OFFICE OF ANDREA G SAWYERS JENNIFER M BELK ESQ PO BOX 2903 HARTFORD CT 06104-2903 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: DISMISSED LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.395.	Nonpriority creditor's name and mailing address CARLOS DIAZ HARMON LINDER AND ROGOWSKY MARK J LINDER ESQ 3 PARK AVE STE 2300 NEW YORK NY 10016 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.396.	Nonpriority creditor's name and mailing address CARLOS DIAZ V NEW ENGLAND MOTOR FREIGHT INC ANTONIO APRILE 52 N WILSON AVE MILLTOWN NJ 08850 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.397.	Nonpriority creditor's name and mailing address CARLSON*SCOTT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.398.	Nonpriority creditor's name and mailing address CARMELA MONACHINO TIMOTHY BELLAVIA ESQ ATTORNEY FOR THE PLAINTIFF PARISI AND BELLAVIA LLP THE POWERS BLDG 16 WEST MAIN ST STE 141 ROCHESTER NY 14614 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.399.	Nonpriority creditor's name and mailing address CARMELA MONACHINO V NEW ENGLAND MOTOR FREIGHT INC ET AL TERRY CONROW 7053 SALMON CREEK RD WILLIAMSON NY 14589 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.400.	Nonpriority creditor's name and mailing address CARMILLE A STOKES 182 CALIFORNIA AVE PROVIDENCE RI 02905 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$86.50
3.401.	Nonpriority creditor's name and mailing address CAROLYN JACK FARMERS INSURANCE NATIONAL DOCUMENT CENTER PO BOX 268992 OKLAHOMA CITY OK 73126-8992 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.402.	Nonpriority creditor's name and mailing address CAROLYN JACK V NEW ENGLAND MOTOR FREIGHT INC ET AL RAFAEL SILVA 405 D RIDGE RD NORTH ARLINGTON NJ 07031 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.403.	Nonpriority creditor's name and mailing address CAROTRANS CLAIMS DEPARTMENT CINDY RAFART 7200 NW 19TH ST STE 505 MIAMI FL 33126-1200 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,200.00
3.404.	Nonpriority creditor's name and mailing address CARPENTER*DANA Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.405.	Nonpriority creditor's name and mailing address CARPENTER*HOWARD Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.406.	Nonpriority creditor's name and mailing address CARRIER ENTERPRISE 2MA BRETT HAWKINS 2401 DABNEY RD RICHMOND VA 23230-2514 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$80.05
3.407.	Nonpriority creditor's name and mailing address CARRIER INDUSTRIES, INC. I-71 NORTH AVENUE EAST ELIZABETH NJ 07201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,857,124.23
3.408.	Nonpriority creditor's name and mailing address CARRIER LYNX LLC ZACH TAYLOR 15954 S MUR-LEN RD STE OLATHE KS 66062-8300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$276.75

Debtor **New England Motor Freight, Inc.**

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3.409.	Nonpriority creditor's name and mailing address CARRIER TRANSICOLD 8330 STATE ROAD PHILADELPHIA PA 19136 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$147.07
3.410.	Nonpriority creditor's name and mailing address CARRIER TRANSICOLD N.J. 8330 STATE ROAD PHILADELPHIA PA 19136 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,396.64
3.411.	Nonpriority creditor's name and mailing address CARROLL INDEPENDENT FUEL, LLC P O BOX 64686 BALTIMORE MD 21264-4686 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$20,911.38

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3.412.	Nonpriority creditor's name and mailing address CARTRIGHT*RALPH Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.413.	Nonpriority creditor's name and mailing address CARY COMPANY OVAIS YOUSUF 1195 W FULLERTON AVE ADDISON IL 60101-4303 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$68.78
3.414.	Nonpriority creditor's name and mailing address CASANOVA*DAVID Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.415.	Nonpriority creditor's name and mailing address CASANOVA*DAVID Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.416.	Nonpriority creditor's name and mailing address CASESTACK INC MARIA LIWAG 3000 OCEAN PARK BLVD STE 1000 SANTA MONICA CA 90405-3020 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$540.96
3.417.	Nonpriority creditor's name and mailing address CASESTACK INC JAMAICA MAE ESCUDERO 3000 OCEAN PARK BLVD STE 1000 SANTA MONICA CA 90405-3020 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,854.00

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3.418.	Nonpriority creditor's name and mailing address CASS INFORMATION SYSTEMS % NEXEO SOLUTIONS PO BOX 17600 SAINT LOUIS MO 63178-7600 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,950.06
3.419.	Nonpriority creditor's name and mailing address CATANIA OILS MARC PICARIELLO 3 NEMCO WAY AYER MA 01432-1539 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$714.14
3.420.	Nonpriority creditor's name and mailing address CATHERINE DARDEN AND MARY COPELAND JIMMIE J JENKINS ATTORNEY FOR PLAINTIFF 1507 E 53RD ST 418 CHICAGO IL 60615 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.421.	Nonpriority creditor's name and mailing address CATHERINE DARDEN ET AL V NEW ENGLAND MOTOR FREIGHT INC ANITA JAHANBAN ATTORNEY FOR THE DEFENDANT TRESSLER LLP 233 SOUTH WACKER DR 61ST FL CHICAGO IL 60606 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.422.	Nonpriority creditor's name and mailing address CATHERINE DARDEN ET AL V NEW ENGLAND MOTOR FREIGHT INC RALPH D GALLUP 207 E MAIN ST REDDICK IL 60961 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.423.	Nonpriority creditor's name and mailing address CBA SERVICES INC PO BOX 628 SCOTCH PLAINS NJ 07076 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$600.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.424.	Nonpriority creditor's name and mailing address CEBROSKY*MICHAEL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.425.	Nonpriority creditor's name and mailing address CEI SUBROGATION SVC 4850 STREET RD STE 220 TREVOSSE PA 19053 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.426.	Nonpriority creditor's name and mailing address CELIL CAVUSOGLU POB 4290 WINDHAM NH 03087-4290 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.427.	Nonpriority creditor's name and mailing address CELLUCAP MANUFACTURING PATRICIA IANNESSA 4626 N 15TH ST PHILADELPHIA PA 19140-1109 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$225.00
3.428.	Nonpriority creditor's name and mailing address CENTERLINE CENTERLINE DRIVERS,LLC PO BOX 31001-1431 PASADENA CA 91110-1431 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,948.06
3.429.	Nonpriority creditor's name and mailing address CENTOR INC CLAIMS DEPT 5091 COUNTY ROAD 120 MILLERSBURG OH 44654-9231 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$717.20

Debtor **New England Motor Freight, Inc.**

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3.430.	Nonpriority creditor's name and mailing address CENTOR INC C/OUNYSON LOGISTICS STJOHN WESTBROOK 2000 CLEARWATER DR OAK BROOK IL 60523-8809 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$717.20
3.431.	Nonpriority creditor's name and mailing address CENTRAL BUSINESS SYS ALICIA JOYNER 1219 WALT WHITMAN RD MELVILLE NY 11747 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$194.66
3.432.	Nonpriority creditor's name and mailing address CENTRAL BUSINESS SYSTEMS 1219 WALT WHITMAN ROAD MELVILLE NY 11747 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$273.85

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3.433.	Nonpriority creditor's name and mailing address CENTRAL GARDEN BARBARA ANN TAMPLIN PO BOX 290 MADISON GA 30650-0290 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,174.15
3.434.	Nonpriority creditor's name and mailing address CENTRAL GARDEN & PET BARBARA ANN TAMPLIN PO BOX 290 MADISON GA 30650 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$178.60
3.435.	Nonpriority creditor's name and mailing address CENTRAL HUDSON GAS & ELECTRIC 284 SOUTH AVE POUGHKEEPSIE NY 12601-4839 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,028.00

Debtor **New England Motor Freight, Inc.**

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3.436.	Nonpriority creditor's name and mailing address CENTRAL INS CO POB 353 VAN WERT OH 45891-9938 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.437.	Nonpriority creditor's name and mailing address CENTRAL PET DISTRIBU C/O ASSOCIATED TRAF SRV 861 VILLAGE OAKS DR COVINA CA 91724-3673 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,514.93
3.438.	Nonpriority creditor's name and mailing address CENTRAL SALES COMPANY KEN TEED 200 PRICE INDUSTRIAL LA HUNTINGTON WV 25705-1773 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$914.37

Debtor **New England Motor Freight, Inc.**

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3.439.	Nonpriority creditor's name and mailing address CENTRAN LOGISTICS STEVE BOROS 6707 BESSEMER AVE CLEVELAND OH 44127-1808 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,458.70
3.440.	Nonpriority creditor's name and mailing address CENTRIC BUSINESS SYSTEMS, INC PO BOX 75222 BALTIMORE MD 21275-5222 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,151.77
3.441.	Nonpriority creditor's name and mailing address CERTIFIED FLOORCOVERING INSTALLATIONS 730 PASADENA DRIVE ERIE PA 16505 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,720.56

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3.442.	Nonpriority creditor's name and mailing address CESAR URAGA AND MELIVETTE URAGA KOULER AND RUSH PC BRAD S RUSH ESQ SENTRY OFFICE PLAZA 216 HADDON AVE STE 506 WESTMONT NJ 08108 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.443.	Nonpriority creditor's name and mailing address CFE EQUIPMENT CORPORATION 818 WIDGEON ROAD NORFOLK VA 23513 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$744.42
3.444.	Nonpriority creditor's name and mailing address CH ROBINSON JADE SOLIS 1501 N MITTEL BLVD STE B WOOD DALE IL 60191-1055 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$621.50

Debtor **New England Motor Freight, Inc.**

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3.445.	Nonpriority creditor's name and mailing address CH ROBINSON THERESE KANIEWSKI 1501 N MITTEL BLVD STE B WOOD DALE IL 60191-1055 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,604.23
3.446.	Nonpriority creditor's name and mailing address CH ROBINSON KATE SEGER 14800 CHARLSON RD, STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$16,721.60
3.447.	Nonpriority creditor's name and mailing address CH ROBINSON MEGAN THOMSEN 14800 CHARLSON RD, STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$43,966.66

Debtor **New England Motor Freight, Inc.**

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3.448.	Nonpriority creditor's name and mailing address CH ROBINSON 8610 BALTIMORE WASHINGTON SUTIE 220 JESSUP MD 20794 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$582.22
3.449.	Nonpriority creditor's name and mailing address CH ROBINSON AMANDA RAMCHARRAN 230-59 INT'L AIRPORT CTR JAMAICA NY 11413 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,270.00
3.450.	Nonpriority creditor's name and mailing address CH ROBINSON WOLRDWIDE MEGAN THOMSEN 13551 TRITON PARK BLVD STE 1500 LOUISVILLE KY 40223-4199 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$34.94

Debtor **New England Motor Freight, Inc.**

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3.451.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE MICHAEL CONNELL 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.452.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE TINA SCHREIFELS 14800 CHARLSON RD STE 2100 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,056.78
3.453.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE JASON BURNS 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,302.10

Debtor **New England Motor Freight, Inc.**

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3.454.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE ANDREW DE MOTT 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,791.77
3.455.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE KATE SEGER 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,933.68
3.456.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE IREENA VORAVONGSY 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,236.61

Debtor **New England Motor Freight, Inc.**

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3.457.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE DANIELLE FORER 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$22,068.81
3.458.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE MEGAN THOMSEN 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$52,364.64
3.459.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE MICHELLE BLACHFELNER 14800 CHARLSON RD STE 1450 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$131,494.11

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3.460.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE DANNY SUSTARSIC 6530 W CAMPUS AVE, STE 170 NEW ALBANY OH 43054 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$200.50
3.461.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE MICHELLE BLACHFEINER 14800 CHARLSON ROAD STE 1 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,919.87
3.462.	Nonpriority creditor's name and mailing address CH ROBINSON WORLDWIDE MEGAN THOMSEN 14800 CHARLSON RD, STE 1 EDEN PRAIRIE MN 55347-5042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$441.58

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3.463.	Nonpriority creditor's name and mailing address CHARKIT CHEMICAL PO BOX 90 NORWALK CT 06856-0090 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$594.60
3.464.	Nonpriority creditor's name and mailing address CHARLES J DEHART, ESQUIRE PO BOX 7005 LANCASTER PA 17604 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$124.00
3.465.	Nonpriority creditor's name and mailing address CHARTER COMMUNICATION % TRANSPORTATION INSIGHT 310 MAIN AVE WAY SE HICKORY NC 28602-3513 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,250.00

Debtor **New England Motor Freight, Inc.**

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3.466.	Nonpriority creditor's name and mailing address CHASE*LARRY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.467.	Nonpriority creditor's name and mailing address CHECK POINT AMANDA JONES 1510 4TH ST SE CANTON OH 44707-3206 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,957.00
3.468.	Nonpriority creditor's name and mailing address CHEMTREAT INC WILL SMART 5640 COX RD GLEN ALLEN VA 23060-9297 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,365.28

Debtor **New England Motor Freight, Inc.**

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3.469.	Nonpriority creditor's name and mailing address CHESAPEAKE PUMP & ELECTRIC LLC 309 LOCK STREET CHESAPEAKE CITY MD 21915 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,422.62
3.470.	Nonpriority creditor's name and mailing address CHESEBORO*JEFFREY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.471.	Nonpriority creditor's name and mailing address CHESEBORO*JEFFREY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.472.	Nonpriority creditor's name and mailing address CHESTER'S TOWING & RECOVERY 606 PORT WASHINGTON BLVD PORT WASHINGTON NY 11050 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$205.00
3.473.	Nonpriority creditor's name and mailing address CHICK'S TOWING SERVICE 1135 CAPITAL HIGHWAY PENNSAUKEN NJ 08110 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,410.00
3.474.	Nonpriority creditor's name and mailing address CHINN*PAUL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.475.	Nonpriority creditor's name and mailing address CHIPPENHAN & JOHNSTON-WILLIS HOSPITALS,INC-CITY OF RICHMOND 400 NORTH 9TH STREET RICHMOND VA 23219 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$101.69
3.476.	Nonpriority creditor's name and mailing address CHIRAG SUTHA ATTORNEY FOR THE PLAINTIFF GRIFFITH LAW CHRISTOPHER COYNE 256 SEABOARD LN FRANKLIN TN 37067 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.477.	Nonpriority creditor's name and mailing address CHIRAG SUTHA V NEW ENGLAND MOTOR FREIGHT INC ET AL ALAN SHOEMAKER 970 SILVER LAKE RD LEWISBERRY PA 17339 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.478.	Nonpriority creditor's name and mailing address CHR LTL 14800 CHARLSON RD SUITE 2100 EDEN PRAIRIE MN 55347-5051 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$96.76
3.479.	Nonpriority creditor's name and mailing address CHRIS ABRAMS ATTORNEY FOR THE PLAINTIFF DONALD WERNER 744 BROAD ST STE 522 NEWARK NJ 07102 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.480.	Nonpriority creditor's name and mailing address CHRISTOPHER BRIVIO PROP MALL MGR 630 OLD COUNTRY RD GARDEN CITY NY 11530 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.481.	Nonpriority creditor's name and mailing address CHRISTOPHER*SHAWN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.482.	Nonpriority creditor's name and mailing address CHRLTL 14800 CHARLSON RD SUITE 2100 EDEN PRAIRIE MN 55347-5051 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$876.69
3.483.	Nonpriority creditor's name and mailing address CHUBB DENISE MEISMER 10901 KENWOOD RD BLUE ASH OH 45242-2813 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$63,315.52

Debtor **New England Motor Freight, Inc.**

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3.484.	Nonpriority creditor's name and mailing address CHURCH OIL COMPANY, INC P O BOX 1272 PLATTSBURG NY 12901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,476.69
3.485.	Nonpriority creditor's name and mailing address CHURCHILL MEDICAL JESSICA PARKER 87 VENTURE DR DOVER NH 03820-5914 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,598.00
3.486.	Nonpriority creditor's name and mailing address CIANGIOLA*WILLIAM Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.487.	Nonpriority creditor's name and mailing address CINCINNATI LAB & PET JEREMY MULLIN 11385 SEBRIND DR CINCINNATI OH 45240 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$247.72
3.488.	Nonpriority creditor's name and mailing address CINTAS CORPORATION PO BOX 630910 CINCINNATI OH 45263 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$720.27
3.489.	Nonpriority creditor's name and mailing address CINTAS CORPORATION PO BOX 630803 CINCINNATI OH 45263-0803 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,077.41

Debtor **New England Motor Freight, Inc.**

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3.490.	Nonpriority creditor's name and mailing address CINTAS CORPORATION #616 P O BOX 630803 CINCINNATI OH 45263-0803 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,366.74
3.491.	Nonpriority creditor's name and mailing address CINTAS CORPORATION #782 P O BOX 630910 CINCINNATI OH 45263-0910 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$244.33
3.492.	Nonpriority creditor's name and mailing address CINTAS CORPORATION 2 DBA/CINTAS FIRE PROTECTION PO BOX 636525 CINCINNATI OH 45263-6525 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$22,712.13

Debtor **New England Motor Freight, Inc.**

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3.493.	Nonpriority creditor's name and mailing address CIRCLE GLASS LLC KAMELA INSHAN 13 JENSEN DR SOMERSET NJ 08873-1393 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,215.20
3.494.	Nonpriority creditor's name and mailing address CITATION PROCESSING CENTER PO BOX 55890 BOSTON MA 02205-5890 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$40.00
3.495.	Nonpriority creditor's name and mailing address CITIZEN CIDER CAITLIN JENNESS 316 PINE ST STE 114 BURLINGTON VT 05401-4740 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,169.02

Debtor **New England Motor Freight, Inc.**

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3.496.	Nonpriority creditor's name and mailing address CITIZEN CIDER RYAN HOHL 316 PINE ST, STE 114 BURLINGTON VT 05401-4740 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,409.64
3.497.	Nonpriority creditor's name and mailing address CITY COURT OF NEW ROCHELLE P O BOX 5090 WHITE PLAINS NY 10602-5090 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$864.00
3.498.	Nonpriority creditor's name and mailing address CITY OF BALTIMORE REVENUE COLLECTIONS. PO BOX 17535 . BALTIMORE MD 21297 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$355.74

Debtor **New England Motor Freight, Inc.**

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3.499.	Nonpriority creditor's name and mailing address CITY OF CONCORD GEN. SERVICE 311 N. STATE ST CONCORD NH 03301 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$224.24
3.500.	Nonpriority creditor's name and mailing address CITY OF HAGERSTOWN WATER AND WASTEWATER PO BOX 1498 HAGERSTOWN MD 21741-1498 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$415.88
3.501.	Nonpriority creditor's name and mailing address CITY OF NEW HAVEN 815 LINCOLN HWY EAST NEW HAVEN IN 46774 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$567.18

Debtor **New England Motor Freight, Inc.**

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3.502.	Nonpriority creditor's name and mailing address CITY OF PHILADELPHIA PARKING VIOLATIONS BRANCH P.O. BOX 41818 PHILADELPHIA PA 19101 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$51.00
3.503.	Nonpriority creditor's name and mailing address CITY UTILITIES PO BOX 4632 CAROL STREAM IL 4632 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$195.91
3.504.	Nonpriority creditor's name and mailing address CJ SOLUTIONS GROUP JENNIFER JOSLYN 10155 SAGE HILL WAY ESCONDIDO CA 92026-6608 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$49,722.59

Debtor **New England Motor Freight, Inc.**

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3.505.	Nonpriority creditor's name and mailing address CJS VIOLATIONS SVCS 1421 HAMLIN HWYET LAKE ARIEL PA 18436 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$899.50
3.506.	Nonpriority creditor's name and mailing address CL ENTERPRISES PO BOX 190 SHORTSVILLE NY 14548 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,277.88
3.507.	Nonpriority creditor's name and mailing address CLARKE*PETER Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.508.	Nonpriority creditor's name and mailing address CLASSIC WINES BARTOSZ POMYKALA 52 POPLAR ST STAMFORD CT 06907-2705 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.509.	Nonpriority creditor's name and mailing address CLEANING SPECIALISTS OF WNY 167 YOUNG STREET TONAWANDA NY 14150 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$591.60
3.510.	Nonpriority creditor's name and mailing address CLEANNET OF ILLINOIS, INC 9861 BROKEN LAND PKWY STE 208 COLUMBIA MD 21046 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$325.00

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3.511.	Nonpriority creditor's name and mailing address CLEARFREIGHT INC JFK INTL AIRPORT 250 BLDG 75 JAMAICA NY 11430-1814 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$687.00
3.512.	Nonpriority creditor's name and mailing address CLEARY*IVAN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.513.	Nonpriority creditor's name and mailing address CLERK OF CIRCUIT COURTS 14 W JEFFERSON ST RM 212 JOLIET IL 60432 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$545.00

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3.514.	Nonpriority creditor's name and mailing address CLERK OF THE CIVIL COURT QUEENS COUNTY 89-17 SUTPHIN BLVD JAMAICA NY 11435 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$45.00
3.515.	Nonpriority creditor's name and mailing address CLERMONT HOLDINGS, LLC 901 ADAMS CROSSING CINCINNATI OH 45202-1693 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,500.00
3.516.	Nonpriority creditor's name and mailing address CLIF BAR INC % FST LOGISTICS 3035 CHARTER ST COLUMBUS OH 43228-4638 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,730.69

Debtor **New England Motor Freight, Inc.**

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3.517.	Nonpriority creditor's name and mailing address CLIF BAR INC CARGO CLAIMS 1451 66TH STREET EMERYVILLE CA 94608-1004 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,035.99
3.518.	Nonpriority creditor's name and mailing address CLX LOGISTICS MARY ELLEN MC KAY 960 HARVEST DR BLDG A BLUE BELL PA 19422-1900 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$86.95
3.519.	Nonpriority creditor's name and mailing address COAST TO COAST CARRIERS CARGO CLAIMS PO BOX 110994 BROOKLYN NY 11211-0994 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$499.00

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3.520.	Nonpriority creditor's name and mailing address COAST TO COAST CARRIERS SK PO BOX 110994 BROOKLYN NY 11211-0994 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,202.62
3.521.	Nonpriority creditor's name and mailing address COAST TO COAST CARRIERS SK PO BOX 110994 BROOKLYN NY 11211-0994 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$41.76
3.522.	Nonpriority creditor's name and mailing address COATES TONERS BILL GRIBBLE 555 COUNTRY CLUB RD DALLAS PA 18612-9241 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00

Debtor **New England Motor Freight, Inc.**

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3.523.	Nonpriority creditor's name and mailing address COCKERHAM*CHARLES Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.524.	Nonpriority creditor's name and mailing address COHEN STEEL SUPPLY INC 10 BASIN ST CONCORD NH 03301 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$747.32
3.525.	Nonpriority creditor's name and mailing address COLGATE PALMOLIVE COMPANY SHARON HINDS 3100 CUMBERLAND BLVD STE 700 ATLANTA GA 30339-5940 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,170.00

Debtor **New England Motor Freight, Inc.**

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3.526.	Nonpriority creditor's name and mailing address COLLINS*KYRE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.527.	Nonpriority creditor's name and mailing address COLUMBIA CASUALTY CO 113 S SERVICE RD JERICO NY 11753 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.528.	Nonpriority creditor's name and mailing address COLUMBIA FLEET SERVICE INC P O BOX 1038 JESSUP MD 20794 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$450.00

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3.529.	Nonpriority creditor's name and mailing address COLUMBIA GAS PO BOX 742537 CINCINNATI OH 45274-2537 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,979.51
3.530.	Nonpriority creditor's name and mailing address COLUMBIA GAS PO BOX 742510 CINCINNATI OH 45274-2510 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,112.01
3.531.	Nonpriority creditor's name and mailing address COLUMBUS CITY TREASURER WATER & SEWER SERVICES PO BOX 182882 COLUMBUS OH 43218-2882 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,651.92

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3.532.	Nonpriority creditor's name and mailing address COLUMBUS JOINT CLUTCH PO BOX 14805 COLUMBUS OH 43214-4805 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$126.00
3.533.	Nonpriority creditor's name and mailing address COMBINED METALS OF CHICAGO NORMAN BURTIN 2401 W GRANT AVE BELLWOOD IL 60104-1660 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,726.07
3.534.	Nonpriority creditor's name and mailing address COMCAST PO BOX 70219 PHILADELPHIA PA 19176-0219 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$434.59

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3.535.	Nonpriority creditor's name and mailing address COMCAST PO BOX 3001 SOUTHEASTERN PA 19398-3001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$224.72
3.536.	Nonpriority creditor's name and mailing address COMED P O BOX 6111 CAROL STREAM IL 60197-6111 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$944.74
3.537.	Nonpriority creditor's name and mailing address COMMERCE INS ASO CHRISTOPHER J ROSSI 11 GORE RD WEBSTER MA 01570 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.538.	Nonpriority creditor's name and mailing address COMMONWEALTH OF MASS DEPT OF FIRE SERVICES PO BOX 1025- STATE ROAD STOW MA 01775 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25.00
3.539.	Nonpriority creditor's name and mailing address COMMONWEALTH OF MASSACHUSETTS EZDRIVEMA PAYMENT PROC CNTR P O BOX 847840 BOSTON MA 02284-7840 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$52.80
3.540.	Nonpriority creditor's name and mailing address COMMONWEALTH TRAILER PARTS,INC 100 WEST CRONE ROAD SUITE D YORK PA 17406 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$402.19

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3.541.	Nonpriority creditor's name and mailing address COMMUNITY SOLUTIONS MIKE Warburton 340 W NEWBERRY RD STE B BLOOMFIELD CT 06002-1393 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$611.25
3.542.	Nonpriority creditor's name and mailing address COMPANY C % TECH LOGISTICS 300 ELM ST UNIT 1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$146.37
3.543.	Nonpriority creditor's name and mailing address COMPASS HEALTH % TFM 5905 BROWNSVILLE RD PITTSBURGH PA 15236-3507 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,705.96

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3.544.	Nonpriority creditor's name and mailing address COMPLY FIRST, LLC 500 CAMPUS DRIVE SUITE 202 MORGANVILLE NJ 07751 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,301.20
3.545.	Nonpriority creditor's name and mailing address COMPOMAX CO LTD PENPAN APIRAKTRAKUL 16 SOI EKAMAI 4 SUKHUMVIT 63 PRAKANONGNA BANGKOK 10110 THAILAND Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,698.80
3.546.	Nonpriority creditor's name and mailing address CON GLOBAL RCS PARTS MICHAEL NOONAN 540 WESTFIELD AVE ROSELLE PARK NJ 07204-1822 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,264.55

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3.547.	Nonpriority creditor's name and mailing address CONAIR CORP SUE RIVERA 150 MILFORD RD EAST WINDSOR NJ 08520-6124 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,299.00
3.548.	Nonpriority creditor's name and mailing address CONAIR CORP P O BOX 490 TROY MI 48099-0490 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$206.36
3.549.	Nonpriority creditor's name and mailing address CONCORD FOODS CAROLYN WHITE 10 MINUTEMAN WAY BROCKTON MA 02301-7508 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$110.88

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3.550.	Nonpriority creditor's name and mailing address CONCORD FOODS DEREK JEFFERSON 10 MINUTEMAN WAY BROCKTON MA 02301-7508 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,996.00
3.551.	Nonpriority creditor's name and mailing address CONNECTICUT INSURANCE GUARANTY ASSOCIATION C/O GUARANTY FUND MANAGEMENT SERVICES DAWNE M. MILLS, CLAIMS MANAGER ONE BOWDOIN SQUARE BOSTON MA 02114 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL LITIGATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.552.	Nonpriority creditor's name and mailing address CONSOLIDATED EDISON CO OF NEW YORK INC GOTTLIEB OSTRAGER LLP WARREN S GOTTLIEB ESQ 333 WESTCHESTER AVE STE S2205 WHITE PLAINS NY 10604 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.553.	Nonpriority creditor's name and mailing address CONTINENTAL INSURANCE CO OF NEW JERSEY 151 NORTH FRANKLIN ST CHICAGO IL 60606 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.554.	Nonpriority creditor's name and mailing address CONTINENTAL LOGISTIC 180 RARITAN CENTER PKWY SUITE 205 EDISON NJ 08837-3646 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$55.00
3.555.	Nonpriority creditor's name and mailing address CONTINENTAL TIRE NORTH AMERICA P O BOX 60049 CHARLOTTE NC 28260-0049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$932.28

Debtor **New England Motor Freight, Inc.**

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3.556.	Nonpriority creditor's name and mailing address COOPER BUSINESS MACHINES INC 3304 STATE STREET ERIE PA 16508 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$164.30
3.557.	Nonpriority creditor's name and mailing address COOPER ELECTRIC SUPPLY CO RACHEL JACKSON 1 MATRIX DRIVE MONROE TOWNSHIP NJ 08831-3702 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$161.47
3.558.	Nonpriority creditor's name and mailing address COOPER*JACQUELIN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.559.	Nonpriority creditor's name and mailing address COPI-RITE INC. 2251 HIGHWAY 33 HAMILTON TWP NJ 08690 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$103.75
3.560.	Nonpriority creditor's name and mailing address COPPEDGE*ANTHONY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.561.	Nonpriority creditor's name and mailing address COPPER & OAK CRAFT 739 HIGH STREET PORTSMOUTH VA 23704-3425 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$765.71

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3.562.	Nonpriority creditor's name and mailing address COPY KING 1162 W 8TH STREET ERIE PA 16502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13.25
3.563.	Nonpriority creditor's name and mailing address CORELLE BRANDS STEPHANIE CREAGER 12000 MOLLY PITCHER HWY S GREENCASTLE PA 17225-9047 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,912.39
3.564.	Nonpriority creditor's name and mailing address CORIM INDUSTRIES MARGARET DE ROSA 1112 INDUSTRIAL PKWY BRICK NJ 08724-2508 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$234.00

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3.565.	Nonpriority creditor's name and mailing address CORPORATE LODGING CONSULTANTS PO BOX 534722 ATLANTA GA 30353-4722 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25,334.34
3.566.	Nonpriority creditor's name and mailing address COSCO SHIPPING LINES (NORTH AMERICA) INC. 15600 JFK BLVD. SUITE 400 HOUSTON TX 77032 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,170.00
3.567.	Nonpriority creditor's name and mailing address COSMOS FOOD PRODUCTS BONNIE HUTCHINSON 200 CALLEGARI DR WEST HAVEN CT 06516-6234 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,392.00

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3.568.	Nonpriority creditor's name and mailing address COUNTRY JUNTION 6565 INTERCHANGE ROAD LEHIGTON PA 18235-5420 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,710.66
3.569.	Nonpriority creditor's name and mailing address COUNTRY LINE ELECTRIC JOHN ABBOTT 31 CHURCH ST SILVER SPRINGS NY 14550-9804 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$870.66
3.570.	Nonpriority creditor's name and mailing address COVENANT TRANSPORT, INC PO BOX 841944 DALLAS TX 75284-1944 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$34,650.61

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.571.	Nonpriority creditor's name and mailing address COVERT TRANSPORTATION JEFF SALKIN 2517 HWY 35 BLDG K STE MANASQUAN NJ 08736-1918 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$413.00
3.572.	Nonpriority creditor's name and mailing address COWORX STAFFING SERVICES LLC PO BOX 417543 BOSTON MA 02241-7543 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,844.35
3.573.	Nonpriority creditor's name and mailing address COX COMMUNICATIONS DEPT 781110 PO BOX 78000 DETROIT MI 48278-1110 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$200.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.574.	Nonpriority creditor's name and mailing address CRAFT BEER GUILD OF CT ZACK MORAN 352 SACKETT POINT RD NORTH HAVEN CT 06473-3103 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.575.	Nonpriority creditor's name and mailing address CRAFT BEER GUILD OF NY ALEX CICCULINIFOLEY 4 CUTTS ST UNIT 4 PORTSMOUTH NH 03801-3784 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,840.00
3.576.	Nonpriority creditor's name and mailing address CRAFT COLLECTIVE INC MIKE SAVAGE 378 PAGE ST STE 13 STOUGHTON MA 02072-1124 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,127.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.577.	Nonpriority creditor's name and mailing address CRAIG BENNETT V BP WATERTOWN ETC ET AL ATTORNEY FOR THIRD PARTY DEFENDANT KEVIN HOLLEY GUNNING AND LAFAZIA INC 33 COLLEGE HILL RD STE 258 WARWICK RI 02886 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.578.	Nonpriority creditor's name and mailing address CRAIG BENNETT V BP WATERTOWN ETC ET AL ATTORNEY FOR GAP INC MICHAEL P BIANITA 60 STATE ST 23RD FL BOSTON MA 02109 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.579.	Nonpriority creditor's name and mailing address CRAIN CUSTODIAL LLC 36 COLLIAS ROAD CHARLESTON WV 25320 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$477.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.580.	Nonpriority creditor's name and mailing address CRC INSURANCE SVCS INC PO BOX 95236 GRAPEVINE TX 76099-9752 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.581.	Nonpriority creditor's name and mailing address CREATIVE FOOD INGREDIENTS JIM REINHART 1 LINCOLN AVE PERRY NY 14530-1605 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.582.	Nonpriority creditor's name and mailing address CRES COR MARY NEMANIC 5925 HEISLEY RD MENTOR OH 44060-1833 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,588.68

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.583.	Nonpriority creditor's name and mailing address CRITICAL HUB NETWORKS, INC PO BOX 11278 SAN JUAN PR 00910 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$309.92
3.584.	Nonpriority creditor's name and mailing address CROSMAN TERRI SHERGILL 7629 RT 5 & 20 BLOOMFIELD NY 14469 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,200.00
3.585.	Nonpriority creditor's name and mailing address CROSMAN CORPORATION TAMMY DIXON 7629 RTE 5 & 20 BLOOMFIELD NY 14469 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$350.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.586.	Nonpriority creditor's name and mailing address CROSS TOWN RADIATOR, INC D/B/A ASSOCIATED AUTO RADIATOR 97-20 SUTPHIN BLVD JAMAICA NY 11435 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$190.53
3.587.	Nonpriority creditor's name and mailing address CROSSFIRE LOGISTICS 2550 ELSSMERE AVE NORFOLK VA 23513-2413 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$533.51
3.588.	Nonpriority creditor's name and mailing address CROSSROADS SERVICES GROUP, LLC 4980 EAST BEVERLY ROAD PHOENIX AZ 85044 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$421.82

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.589.	Nonpriority creditor's name and mailing address CROWLEY*TIMOTHY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.590.	Nonpriority creditor's name and mailing address CROWN PRINCE, INC JEANMARYE STOBAUGH 18581 RAILROAD ST CITY OF INDUSTRY CA 91748-0568 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,402.10
3.591.	Nonpriority creditor's name and mailing address CROWN TOWING SERVICE, INC 1615 MCDONALD STREET BRONX NY 10461 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,515.07

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.592.	Nonpriority creditor's name and mailing address CRYSTAL INFOSYSTEMS LLC 980 MAGNOLIA AVE ,SUITE 5 LARKSPUR CA 94939 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$832.00
3.593.	Nonpriority creditor's name and mailing address CRYSTAL OF AMERICA SUSA APGAR 110 FIELDCREST AVE EDISON NJ 08837-3626 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,076.54
3.594.	Nonpriority creditor's name and mailing address CRYSTALWARE EDDIE T 600 JAMES ST LAKEWOOD NJ 08701-4023 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$78.32

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.595.	Nonpriority creditor's name and mailing address CSF IMPORTS CHERILYN PFINGST 3920 COOK BLVD CHESAPEAKE VA 23323-1626 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$87.00
3.596.	Nonpriority creditor's name and mailing address CUMBERLAND PACKING MARIE STIGALL 2 CUMBERLAND ST BROOKLYN NY 11205-1040 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,486.40
3.597.	Nonpriority creditor's name and mailing address CUMMINS FILTRATION % TRANSPACE CARGO CLAIMS PO BOX 518 LOWELL AR 72745-0518 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.598.	Nonpriority creditor's name and mailing address CURBELL PLASTICS MELISSA STIGLICH 250 WEST KENSINGER DR CRANBERRY TOWNSHIP PA 16066-3438 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.599.	Nonpriority creditor's name and mailing address CURBELL PLASTICS CINDY MC HATTIE 844 N LENOLA RD MOORESTOWN NJ 08057-1052 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$580.00
3.600.	Nonpriority creditor's name and mailing address CURRY*MICHAEL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.601.	Nonpriority creditor's name and mailing address CURTIS INDUSTRIES C/O OUTSOURCE 72 SHARP ST C11 HINGHAM MA 02043-4328 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$100.00
3.602.	Nonpriority creditor's name and mailing address CUSHMAN AND WAKEFIELD NW STE B1 WASHINGTON DC 20005 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.603.	Nonpriority creditor's name and mailing address CUSTOM BANDAG, INC. 401 EAST LINDEN AVE LINDEN NJ 07036-2411 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$105,142.16

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.604.	Nonpriority creditor's name and mailing address CUSTOM COMPANIES CLAIMS DEPARTMENT 317 W LAKE ST NORTHLAKE IL 60164-2433 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$417.90
3.605.	Nonpriority creditor's name and mailing address CUSTOM COMPANIES THOMAS BUTKOVICH 317 WEST LAKE STREET NORTHLAKE IL 60164-2433 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.606.	Nonpriority creditor's name and mailing address CUSTOM DOOR & MIRROR EILEEN LAINE 148 MILBAR BLVD FARMINGDALE NY 11735-1425 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,272.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.607.	Nonpriority creditor's name and mailing address CUSTOM DOOR & MIRROR EILEEN LAINE 148 MILBAR BLVD FARMINGDALE NY 11735 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$584.00
3.608.	Nonpriority creditor's name and mailing address CUYAHOGA COUNTY COURT COMMON PLEAS - CLEVELAND 1200 ONTARIO ST. CLEVELAND OH 44113 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19.91
3.609.	Nonpriority creditor's name and mailing address CVS/PHARMACY DENNIS BERARD 1 CVS DRIVE WOONSOCKET RI 02895-6146 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,472.46

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.610.	Nonpriority creditor's name and mailing address CYNTHIA DENNISON 109 RIDGELAND AVE APT 310 SOUTH PORTLAND ME 04106 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.611.	Nonpriority creditor's name and mailing address D AGATA*ANTHONY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.612.	Nonpriority creditor's name and mailing address D H L SUPPLY CHAIN 260 SALEM CHURCH RD MECHANICSBURG PA 17050 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$34.36

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.613.	Nonpriority creditor's name and mailing address D L S WORLDWIDE 1000 WINDHAM PKWY BOLINGBROOK IL 60490-3507 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,299.27
3.614.	Nonpriority creditor's name and mailing address D M BOWMAN INC P O BOX 37683 BALTIMORE MD 21297-3683 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$519.52
3.615.	Nonpriority creditor's name and mailing address D&J ASSOCIATES 14545 J MILITARY TR #192 DELRAY BEACH FL 33484-3730 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$183.73

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.616.	Nonpriority creditor's name and mailing address D&W DIESEL DAVE SLATO 1503 CLARK STREET AUBURN NY 13021-9526 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$292.45
3.617.	Nonpriority creditor's name and mailing address DAIGLE*ADAM Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.618.	Nonpriority creditor's name and mailing address DAIMLER TRUST 13650K HERITAGE PARKWAY FT WORTH TX 76177 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: GUARANTEE OF LOAN Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$0.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.619. **Nonpriority creditor's name and mailing address**

DALAHIE GARCIA V
NEW ENGLAND MOTOR FREIGHT INC ET AL
JOHN WILLIAM D'AMICO
3265 HATTING PL
BRONX NY 10465

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.620. **Nonpriority creditor's name and mailing address**

DALE LULTZ
ATTORNEY FOR THE PLAINTIFF
ANDREW M KORDUBA
669 WEST LIBERTY ST
MEDINA OH 44256

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.621. **Nonpriority creditor's name and mailing address**

DALE LULTZ V
NEW ENGLAND MOTOR FREIGHT INC ET AL
JEFFREY CHAPMAN
25300 ROCKSIDE RD
APT 212
BEDFORD HTS OH 44146

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.622.	Nonpriority creditor's name and mailing address DALKO RESOURCES CJOHNSON@DRIWORLDWIDE.CO P O BOX 98 SHARPSVILLE PA 16150-0098 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$193.29
3.623.	Nonpriority creditor's name and mailing address DAMAGE RECOVERY PO BOX 801770 KANSAS CITY MO 64180 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.624.	Nonpriority creditor's name and mailing address DANA INC LAURA HAGEN 3000 AUBURN DR BEACHWOOD OH 44122-4335 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.625.	Nonpriority creditor's name and mailing address DANAHER HACH TRANSAUDIT STE 2D 11 MARSHALL RD WAPPINGERS FALLS NY 12590 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$236.55
3.626.	Nonpriority creditor's name and mailing address DANBY PRODUCTS INC VICKY BISH 1800 PRODUCTION DRIV FINDLAY OH 45840-5445 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$334.00
3.627.	Nonpriority creditor's name and mailing address DANDREA WINE & LIQUOR JOHN DANDREA 670 RODI ROAD PITTSBURGH PA 15235-4574 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$168.80

Debtor **New England Motor Freight, Inc.**

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3.628.	Nonpriority creditor's name and mailing address DANIEL MURTHA ATTORNEY FOR THE PLAINTIFF PETER KARAYIANNIS BRADLEY DENKOVICH AND KARAYIANNIA PC 853 FAIRFIELD AVE BRIDGEPORT CT 06604 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.629.	Nonpriority creditor's name and mailing address DANIEL*DAVID Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.630.	Nonpriority creditor's name and mailing address DANIELLE J BARGANIER ATTORNEY FOR THE PLAINTIFF HYATT AND GOLDBLOOM LLC 1 SOUTH ST STE 1200 BALTIMORE MD 21202 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.631.	Nonpriority creditor's name and mailing address DARYL MARTIN AND KIM MARTIN BIGGAM FOX AND SKINNER PATRICK L BIGGAM ESQ 453 STONE CUTTERS WAY MONTPELIER VT 05602 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.632.	Nonpriority creditor's name and mailing address DAVE UDAS MERIDEN 374 SO ELM ST WINDSOR LOCKS CT 06096 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$122.04
3.633.	Nonpriority creditor's name and mailing address DAVE'S HEAVY TOWING 87 OLD CAMPLAIN RD HILLSBOROUGH NJ 08844 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,840.36

Debtor **New England Motor Freight, Inc.**

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3.634.	Nonpriority creditor's name and mailing address DAVID KIM 188 WASHINGTON AVE FORT LEE NJ 07024 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.635.	Nonpriority creditor's name and mailing address DAVIES*STEPHEN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.636.	Nonpriority creditor's name and mailing address DAVIS & GECK CARIBE LTD DO NOT MAIL 212 BLACKHORSE LA NORTH BRUNSWICK NJ 08902-4319 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$803.20

Debtor **New England Motor Freight, Inc.**

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3.637.	Nonpriority creditor's name and mailing address DAY O LITE MANUFACTURING NICHOLAS CONLON 126 CHESTNUT ST WARWICK RI 02888-2104 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,500.00
3.638.	Nonpriority creditor's name and mailing address DB BECKER MAROON GROUP JONATHAN FARAH 46 LEIGH ST CLINTON NJ 08809-1349 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$503.50
3.639.	Nonpriority creditor's name and mailing address DB BECKER MAROON GROUP JONATHAN FARAH 46 LEIGH ST CLINTON NJ 08809-1349 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$223.74

Debtor **New England Motor Freight, Inc.**

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3.640.	Nonpriority creditor's name and mailing address DC AUTO BODY LLC 835 W TRINDLE ROAD MECHANICSBURG PA 17055 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$65.00
3.641.	Nonpriority creditor's name and mailing address DC DISTRIBUTION USA INC JAG CHADHA 102 W 29TH ST NEW YORK NY 10001-5314 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$642.00
3.642.	Nonpriority creditor's name and mailing address DEAN ULSH AUTHORIZED MATCO TOOLS DIST. 232 FOREST ST,PO BOX 384 AUBURN PA 17922 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$254.35

Debtor **New England Motor Freight, Inc.**

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3.643.	Nonpriority creditor's name and mailing address DEBBIE'S STAFFING SERVICES, INC P O BOX 203430 DALLAS TX 75320-3430 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,224.06
3.644.	Nonpriority creditor's name and mailing address DEBJO SALES, LLC 103 NOTCH ROAD OAK RIDGE NJ 07438 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,011.00
3.645.	Nonpriority creditor's name and mailing address DEBRA PASTRANA ATTORNEY FOR PLAINTIFF BRIAN J MONGELLUZZO 1336 WEST MAIN ST SUITE 1B WATERBURY CT 06708 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.646.	Nonpriority creditor's name and mailing address DECAROLIS TRUCK RENTAL INC 333 COLFAX ST ROCHESTER NY 14606 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,398.09
3.647.	Nonpriority creditor's name and mailing address DECORUM OF VIRGINIA 301 WEST 21ST NORFOLK VA 23517 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$632.50
3.648.	Nonpriority creditor's name and mailing address DEE 2 DASSI BESS 183 NATIONAL RD EDISON NJ 08817-2810 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,760.00

Debtor **New England Motor Freight, Inc.**

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3.649.	Nonpriority creditor's name and mailing address DEE LOGISTICS JESSICA FIORIO PO BOX 8707 CRANSTON RI 02920-0707 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,185.00
3.650.	Nonpriority creditor's name and mailing address DEFENDER INDUSTRIES LORI GALLO 42 GREAT NECK ROAD WATERFORD CT 06385-3336 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$453.17
3.651.	Nonpriority creditor's name and mailing address DEHAVEN TRANSPORTATION, INC PO BOX 7236 ROANOKE VA 24019 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$544.35

Debtor **New England Motor Freight, Inc.**

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3.652.	Nonpriority creditor's name and mailing address DEL CORONA & SCARDIGLI USA STEFANO D'ANGELO 568 SUPREME DR BENSENVILLE IL 60106-1122 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$285.00
3.653.	Nonpriority creditor's name and mailing address DELANDE SUPPLY CO KAREN GAUDET PO BOX 707 PEABODY MA 01960-7707 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.654.	Nonpriority creditor's name and mailing address DELAWARE DEPT TRANSPORTATION EZ PASS VIOLATIONS CENTER P O BOX 697 DOVER DE 19903-0697 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9.00

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3.655.	Nonpriority creditor's name and mailing address DELAWARE E-ZPASS VIOLATIONS PO BOX 697 DOVER DE 19903-0697 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18.00
3.656.	Nonpriority creditor's name and mailing address DELTA DENTAL DELTA DENTAL PLAN OF NJ, INC P.O. BOX 36483 NEWARK NJ 07188-6483 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$42,814.06
3.657.	Nonpriority creditor's name and mailing address DELUXE DELIVERY SYSTEMS KENNETH ROMERO 64 W 48TH ST FL 4 NEW YORK NY 10036-1716 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,206.39

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3.658.	Nonpriority creditor's name and mailing address DELUXE HOME & OFFICE CLEANING 428 SOUTH MAIN STREET,STE 101 NORTH SYRACUSE NY 13212 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$961.20
3.659.	Nonpriority creditor's name and mailing address DENNIS CURD BLDG C UNIT 2 NORTH KINGSTOWN RI 02852 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.660.	Nonpriority creditor's name and mailing address DENNIS K. BURKE, INC POBOX 3639 BOSTON MA 02241-3629 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$182,980.74

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3.661.	Nonpriority creditor's name and mailing address DENNIS MORSE ALEXANDER & CATALANO LLC PETER J ADDONIZIO ESQ 6713 COLLAMER RD EAST SYRACUSE NY 13057 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL LITIGATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.662.	Nonpriority creditor's name and mailing address DENSO PRODUCTS & SERVICES EUGENE SAMESHIMA 3900 VIA ORO AVE LONG BEACH CA 90810-1868 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,758.03
3.663.	Nonpriority creditor's name and mailing address DENTSPLY PROSTHETICS DONNA BROOKS PO BOX 2558 YORK PA 17405-2558 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$945.51

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3.664.	Nonpriority creditor's name and mailing address DERBY OFFICE EQUIPME JASON M. BERRY 1040 STATE HWY 29A GLOVERSVILLE NY 12078-5831 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,113.66
3.665.	Nonpriority creditor's name and mailing address DERMARITE IND LLC MARY GOLDBERG 7777 WEST SIDE AVE NORTH BERGEN NJ 07047-6436 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,600.92
3.666.	Nonpriority creditor's name and mailing address DERONDE TIRE SUPPLY JOHN HARHIGH 2010 ELMWOOD AVE BUFFALO NY 14207-1904 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$299.69

Debtor **New England Motor Freight, Inc.**

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3.667.	Nonpriority creditor's name and mailing address DERRICO*PATRICK Address Intentionally Omitted Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.668.	Nonpriority creditor's name and mailing address DERRIGO'S SERVICE CENTER 20439 NYS 180 WATERTOWN NY 13601 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$350.00
3.669.	Nonpriority creditor's name and mailing address DESANTIS DISPATCH CORP 590 BELLEVILLE TURNPIKE BUILDING 30 KEARNY NJ 07032 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$24,830.33

Debtor **New England Motor Freight, Inc.**

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3.670.	Nonpriority creditor's name and mailing address DESCARTES SYSTEMS (USA) LLC PO BOX 404037 ATLANTA GA 30384-4037 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,773.20
3.671.	Nonpriority creditor's name and mailing address DETAILS FLEETWASH 2 ALEWIVE PARK ROAD KENNEBUNK ME 04043 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$674.36
3.672.	Nonpriority creditor's name and mailing address DF STAUFFER BISCUIT COMPANY DONNA STAMBAUGH PO BOX 12002 YORK PA 17403-2616 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$147.24

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3.673.	Nonpriority creditor's name and mailing address DHL GLOBAL FORWARDING BRANDON WILDS 570 POLARIS PARKWAY WESTERVILLE OH 43082-7900 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$180.00
3.674.	Nonpriority creditor's name and mailing address DHL GLOBAL FORWARDING JAMES VOLK 940 APOLLO RD EAGAN MN 55121 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$325.00
3.675.	Nonpriority creditor's name and mailing address DHL GLOBAL SUPPLY CHAIN JOANNA SPYCHALSKI 570 POLARIS PARKWAY DEPT 220 WESTERVILLE OH 43082-7900 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.676.	Nonpriority creditor's name and mailing address DIANE HUBBARD 100 MURON AVE BELLINGHAM MA 02019 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.677.	Nonpriority creditor's name and mailing address DICKINSON FLEET SERVICES, LLC 7717 SOLUTION CENTER CHICAGO IL 60677-7007 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,624.61
3.678.	Nonpriority creditor's name and mailing address DICKINSON TOWN COURT 531 OLD FRONT STREET # 4 BINGHAMTON NY 13905 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5.00

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3.679.	Nonpriority creditor's name and mailing address DICKSON*LEE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.680.	Nonpriority creditor's name and mailing address DILLS COMPANY JULIE KOEPPEN 3007 HARDING HWY E BLDG 201 MARION OH 43302-2575 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,268.55
3.681.	Nonpriority creditor's name and mailing address DIMERCO EXPRESS YEN LUU 955 DILLON DR WOOD DALE IL 60191-1274 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,647.00

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3.682.	Nonpriority creditor's name and mailing address DIR AMERICA CORP BRIAN TSUI 24 WOODWARD AVE STE C RIDGEWOOD NY 11386-1022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$530.41
3.683.	Nonpriority creditor's name and mailing address DISPLAYS2GO TINA LOUREIRO 81 COMMERCE DR FALL RIVER MA 02720-4743 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,076.52
3.684.	Nonpriority creditor's name and mailing address DISUAL PAK LOGISTICS ERIC TEWES 1909 S WAUKEGAN RD WAUKEGAN IL 60085-6709 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,100.00

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3.685.	Nonpriority creditor's name and mailing address DLS WORLDWIDE DELORIS GRANDE 1000 WINDHAM PKWY BOLINGBROOK IL 60490-3507 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$38,542.86
3.686.	Nonpriority creditor's name and mailing address DLS WORLDWIDE 1000 WINDHAM PKWY BOLINGBROOK IL 60490-3507 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,145.70
3.687.	Nonpriority creditor's name and mailing address DLS WORLDWIDE DELORIS GRANDE 1000 WINDHAM PKWY BOLINGBROOK IL 60490-3507 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,836.07

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3.688.	Nonpriority creditor's name and mailing address DM TOWING AND TRANSPORTATION 254 OLD LYMAN ROAD SOUTH HADLEY MA 01075 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,478.00
3.689.	Nonpriority creditor's name and mailing address DMC INSURANCE 10475 CROSSPOINT BLVD STE 220 INDIANAPOLIS IN 46256 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.690.	Nonpriority creditor's name and mailing address DO IT BEST CORP AMY SOMMER PO BOX 868 FORT WAYNE IN 46801-0868 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$118.26

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3.691.	Nonpriority creditor's name and mailing address DO IT BEST CORP RONDA YENNA PO BOX 868 FORT WAYNE IN 46801-0868 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$628.08
3.692.	Nonpriority creditor's name and mailing address DO IT BEST CORP AMY SOMMER 6502 NELSON RD FORT WAYNE IN 46801-1477 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,081.46
3.693.	Nonpriority creditor's name and mailing address DO IT BEST CORP SHARON LONG X 5324(4/12 PO BOX 868 FORT WAYNE IN 46801-0868 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$40.98

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3.694.	Nonpriority creditor's name and mailing address DO IT BEST CORP AMY SOMMER PO BOX 868 FORT WAYNE IN 46801-0868 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,814.72
3.695.	Nonpriority creditor's name and mailing address DOHRN TRANSFER 625 3RD AVE ROCK ISLAND IL 61201-8351 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$510.34
3.696.	Nonpriority creditor's name and mailing address DOLLAR GENERAL LORI BALDWIN 100 MISSION RIDGE GOODLETTSVILLE TN 37072-2171 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,137.20

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3.697.	Nonpriority creditor's name and mailing address DOMBEK, ROBERT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.698.	Nonpriority creditor's name and mailing address DOMESTIC FREIGHTWAYS DEBI JACKSON-RZEMYK 1265 SUNRISE HIGHWAY #110 BAYSHORE NY 11706-5925 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,155.00
3.699.	Nonpriority creditor's name and mailing address DOMINICK DALBO BOOTAY BEVINGTON AND NICHOLS LLC TRAVIS DUNN ESQ 6 CLAIRTON BLVD PITTSBURGH PA 15236 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.700.	Nonpriority creditor's name and mailing address DON J URIE ASSOCIATES CRAIG URIE 3905 N DELSEA DRIVE VINELAND NJ 08360-1664 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.701.	Nonpriority creditor's name and mailing address DONALD CIPRIANO-STATE MARSHALL 45 FREIGHT STREET, STE 1 WATERBURY CT 06702 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$35.45
3.702.	Nonpriority creditor's name and mailing address DONNELLON MCCARTHY ENTERPRISES 10855 MEDALLION DR CINCINNATI OH 45241 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$63.45

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3.703.	Nonpriority creditor's name and mailing address DORMAN PRODUCTS KEN JOHNSON 3400 E WALNUT ST COLMAR PA 18915-9768 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,790.00
3.704.	Nonpriority creditor's name and mailing address DOROTHY GRIFFITH V NEW ENGLAND MOTOR FREIGHT INC DENNIS DONNELLY 2024 STATE ST SCHENECTADY NY 12304 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.705.	Nonpriority creditor's name and mailing address DOT, UNIVERSITY OF MARYLAND 8056 REGENTS DRIVE COLLEGE PARK MD 20742 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$150.00

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3.706.	Nonpriority creditor's name and mailing address DOUGLAS STEPHEN PLASTICS INC NANCY SADKIN PO BOX 2775 PATERSON NJ 07509-2775 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$192.03
3.707.	Nonpriority creditor's name and mailing address DRESSEL WELDING SUPPLY INC PO BOX 69016 BALTIMORE MD 21264-9016 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$232.62
3.708.	Nonpriority creditor's name and mailing address DRL TRANSPORT KEITH LECLAIR PO BOX 248 WINDHAM NH 03087-0248 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$625.00

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3.709.	Nonpriority creditor's name and mailing address DRL TRANSPORT JIM LUCAS 7 WALL ST WINDHAM NH 03087-1663 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,433.10
3.710.	Nonpriority creditor's name and mailing address DSC LOGISTICS CHRISTINA BALDASSARRA 1750 S WOLF RD DES PLAINES IL 60018-1924 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,835.25
3.711.	Nonpriority creditor's name and mailing address DSC LOGISTICS CHRISTINA BALDASSARRA 1750 SOUTH WOLF RD DES PLAINES IL 60018-1924 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,131.65

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3.712.	Nonpriority creditor's name and mailing address DSI DOOR SERVICES INC PO BOX 8772 PORTLAND ME 04104 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$246.45
3.713.	Nonpriority creditor's name and mailing address DSV AIR & SEA INC MARK FERNANDEZ 100 WALNUT AVE STE 405 CLARK NJ 07066-1253 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,138.42
3.714.	Nonpriority creditor's name and mailing address DSV AIR & SEA INC KHALIL KAMARA 21515 RIDGETOP CIR STE 350 STERLING VA 20166-8519 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,861.37

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3.715.	Nonpriority creditor's name and mailing address DUKE ENERGY PO BOX 1326 CHARLOTTE NC 28201-1326 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$947.58
3.716.	Nonpriority creditor's name and mailing address DUPONT NUTRITION USA INC RHONALYN ARSENAL 974 CENTRE RD WILMINGTON DE 19805-1269 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,296.16
3.717.	Nonpriority creditor's name and mailing address DUPONT NUTRITION USA INC RHONALYN ARSENAL 974 CENTRE RD WILMINGTON DE 19805-1269 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,432.57

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3.718.	Nonpriority creditor's name and mailing address DURKEE MOWER INC EDIE HARRIS 2 EMPIRE STREET LYNN MA 01902-1815 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$105.28
3.719.	Nonpriority creditor's name and mailing address DUTY'S LOCK,SAFE & SECURITY 3101 GETTYSBURG ROAD CAMP HILL PA 17011 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5.30
3.720.	Nonpriority creditor's name and mailing address DUVEL MOORTGAT USA BRITNEY LIDDELL 21 RAILROAD AVE STE 32 COOPERSTOWN NY 13326-1381 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,688.00

Debtor **New England Motor Freight, Inc.**

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3.721.	Nonpriority creditor's name and mailing address DWS INC JEROME MENDICINO 102 KIMBALL AVE STE 2 SOUTH BURLINGTON VT 05403-6838 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,645.50
3.722.	Nonpriority creditor's name and mailing address DWS PALLET INC MARIE GUNTIS 89 N INDUSTRY CT DEER PARK NY 11729 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$384.84
3.723.	Nonpriority creditor's name and mailing address DWS PRINTING MARIE GUNTIS 89 N INDUSTRY CT DEER PARK NY 11729-4601 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$70.59

Debtor **New England Motor Freight, Inc.**

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3.724.	Nonpriority creditor's name and mailing address DYER*WILLIAM Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.725.	Nonpriority creditor's name and mailing address DYNACORN INTERNATIONAL LLC SHANNON ADDISON 4030 VIA PESCADOR CAMARILLO CA 93012-5044 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.726.	Nonpriority creditor's name and mailing address DYNAREX COPORATION LORI ALDOROTY 10 GLENSHAW ST ORANGEBURG NY 10962-1207 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$118.00

Debtor **New England Motor Freight, Inc.**

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3.727.	Nonpriority creditor's name and mailing address DYNAREX CORP LORI ALDOROTY 10 GLENSHAW ST ORANGEBURG NY 10962-1207 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$553.50
3.728.	Nonpriority creditor's name and mailing address DYNAREX CORPORATION PATTI RICCI 10 GLENSHAW ST ORANGEBURG NY 10962-1207 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,927.00
3.729.	Nonpriority creditor's name and mailing address DYNAREX CORPORATION LORI ALDOROTY 10 GLENSHAW ST ORANGEBURG NY 10962-1207 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,763.75

Debtor **New England Motor Freight, Inc.**

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3.730.	Nonpriority creditor's name and mailing address DYNASTY EXPRESS INTERNATIONAL CORP YONG QU 160-19 ROCKAWAY BLVD JAMAICA NY 11434-5130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$296.00
3.731.	Nonpriority creditor's name and mailing address E A A COOPER TRANS RENNA FOWLER P O BOX 6827 DOTHAN AL 36302-6827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,935.00
3.732.	Nonpriority creditor's name and mailing address E HABERLI ELECTRIC LLC 125 RESEARCH PARKWAY MERIDEN CT 06450 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,647.50

Debtor **New England Motor Freight, Inc.**

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3.733.	Nonpriority creditor's name and mailing address E.L.S. PRODUCTS CORP 94 JEFFRYN BLVD EAST. UNIT D DEAR PARK NY 11729 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$425.00
3.734.	Nonpriority creditor's name and mailing address EAGLE HAULING INC 5 CLEARVIEW AVE SELDEN NY 11784 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,040.00
3.735.	Nonpriority creditor's name and mailing address EAST RIVER ENERGY, INC PO BOX 388 GUILFORD CT 06437-0388 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$150,860.04

Debtor **New England Motor Freight, Inc.**

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3.736.	Nonpriority creditor's name and mailing address EAST WEST BANK ANDREW ROSS SVP 533 MADISON AVE 8TH FL NEW YORK NY 10022 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: GUARANTEE ON LOAN Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$0.00
3.737.	Nonpriority creditor's name and mailing address EAST WEST BANK ANDREW ROSS SVP 533 MADISON AVE 8TH FL NEW YORK NY 10022 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LETTERS OF CREDIT Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,951,656.00
3.738.	Nonpriority creditor's name and mailing address EASTER UNLIMITED JOHN X 232 C07529 80 VOICE RD CARLE PLACE NY 11514-1514 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$100.00

Debtor **New England Motor Freight, Inc.**

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3.739.	Nonpriority creditor's name and mailing address EASTERN BAG & PAPER COMPANY, 200 RESEARCH DRIVE MILFORD CT 06460 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$165.32
3.740.	Nonpriority creditor's name and mailing address EASTERN FREIGHT WAYS, INC. I-71 NORTH AVENUE EAST ELIZABETH NJ 07201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$11,830,197.95
3.741.	Nonpriority creditor's name and mailing address EASTERN LAUNDRY SYSTEMS DAVID CABRAL 705 MYLES STANDISH BLVD TAUNTON MA 02780-7300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$861.05

Debtor **New England Motor Freight, Inc.**

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3.742.	Nonpriority creditor's name and mailing address EASTERN OFFICE SUPPLY CO. 139 ERIE BLVD SCHENECTADY NY 12305 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$135.00
3.743.	Nonpriority creditor's name and mailing address EASTERN OIL CORPORATION THOMAS FOWLER 98 VANADIUM RD BRIDGEVILLE PA 15017-3061 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$893.92
3.744.	Nonpriority creditor's name and mailing address EBLENS CASUAL DONNA FRACUSSO 299 INDUSTRIAL LANE TORRINGTON CT 06790-2326 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.745.	Nonpriority creditor's name and mailing address EBLENS CASUAL JILL GOLDFARB 299 INDUSTRIAL LANE TORRINGTON CT 06790-2326 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,674.62
3.746.	Nonpriority creditor's name and mailing address ECHO GLOBAL 600 W CHICAGO AVE SUITE 725 CHICAGO IL 60610 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$144.37
3.747.	Nonpriority creditor's name and mailing address ECHO GLOBAL 600 W CHICAGO AVE SUITE 725 CHICAGO IL 60610 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$25.00

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3.748.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOG ECHO GLOBAL LOG 600 W CHICAGO AVE SUITE 725 CHICAGO IL 60610 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$321.54
3.749.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTIC JAZMIN GARCIA 600 W CHICAGO AVE STE 725 CHICAGO IL 60610 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,480.46
3.750.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTIC 600 W CHICAGO #830 CHICAGO IL 60610-2422 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$185.73

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3.751.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTIC 25572 NETWORK PLACE CHICAGO IL 60673-1255 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$155.35
3.752.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTICS EVITA RIVERA 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.753.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTICS TASIA DAVIDSON 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00

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3.754.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTICS ASHLEY STEVENSON 600 W CHICAGO AVE STE 725 CHICAGO IL 60610-1430 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$100.00
3.755.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTICS JASMINE GARCIA 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,451.78
3.756.	Nonpriority creditor's name and mailing address ECHO GLOBAL LOGISTICS GEORGIA CORDOVA 600 W CHICAGO AVE STE 725 CHICAGO IL 60610-2422 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$618.99

Debtor **New England Motor Freight, Inc.**

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3.757.	Nonpriority creditor's name and mailing address ECMC P O BOX 16478 LOCKBOX 7096 ST PAUL MN 55116-0848 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$120.00
3.758.	Nonpriority creditor's name and mailing address ECOLAB INC ANDREW SEFFROOD 1 ECOLAB PL SAINT PAUL MN 55102-2739 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,741.84
3.759.	Nonpriority creditor's name and mailing address ECP INC TRACIE NICKLEY 11210 KATHERINES XIN WOODRIDGE IL 60517-5053 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,299.02

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3.760.	Nonpriority creditor's name and mailing address ECTON & SON SERVICE & REPAIR 14045 MERCERSBURG ROAD GREENCASTLE PA 17225 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,875.00
3.761.	Nonpriority creditor's name and mailing address ED & ED BUSINESS TECHNOLOGY, PO BOX 280 WESTMORELAND NY 13490-0280 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$185.76
3.762.	Nonpriority creditor's name and mailing address ED & SON GLASS INC 619 EAST MAIN STREET MAPLE SHADE NJ 08052 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$790.00

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3.763.	Nonpriority creditor's name and mailing address EDCO SUPPLY KRISTA DYER 323 36TH ST BROOKLYN NY 11232-2503 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$925.00
3.764.	Nonpriority creditor's name and mailing address EDIBLE ARRANGEMENTS-121 220 RYDERS LN MILLTOWN NJ 08850 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.53
3.765.	Nonpriority creditor's name and mailing address EDIN ZAHIROVIC Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.766.	Nonpriority creditor's name and mailing address EDMANTHA ROUGEUX % RTA STORE 2345 RT 52 STE 1A HOPEWELL JUNCTION NY 12533-3219 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,870.16
3.767.	Nonpriority creditor's name and mailing address EDMONDS*BRUCE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.768.	Nonpriority creditor's name and mailing address EDWARD DON 360 W BUTTERFIELD RD ELMHURST IL 60126-5068 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$144.93

Debtor **New England Motor Freight, Inc.**

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3.769.	Nonpriority creditor's name and mailing address EFAX CORPORATE C/O J2 GLOBAL COMMUNICATIONS, INC P.O. BOX 51873 LOS ANGELES CA 90051-6173 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$599.97
3.770.	Nonpriority creditor's name and mailing address EFSWW MILTON ATKINSON 8112 RDIGEPOINT DR, STE 200 IRVING TX 75063 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,054.10
3.771.	Nonpriority creditor's name and mailing address EHLING*JAMES Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.772.	Nonpriority creditor's name and mailing address EL MUSTEE & SONS PAT MILLER 5431 W 164TH ST CLEVELAND OH 44142-1511 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,897.27
3.773.	Nonpriority creditor's name and mailing address EL MUSTEE & SONS INC PAT MILLER 5431 W 164TH ST CLEVELAND OH 44142-1511 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$939.13
3.774.	Nonpriority creditor's name and mailing address ELECTRIC BATTERY COMPANY LLC 178-15 EVELETH ROAD JAMAICA NY 11434-3405 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$813.80

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.775.	Nonpriority creditor's name and mailing address ELEVATOR INTERIOR DESIGN 100 MARINE BLVD. LYNN MA 01905 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,700.00
3.776.	Nonpriority creditor's name and mailing address ELITE ENVELOPE 280 POND ST RANDOLPH MA 02368 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.777.	Nonpriority creditor's name and mailing address ELITE EXPRESS INC AMANDA MEDINA 30 VILLAGE COURT HAZLET NJ 07730-1533 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$204.12

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.778.	Nonpriority creditor's name and mailing address ELITE EXPRESS INC AMANDA MEDINA 30 VILLAGE CT HAZLET NJ 07730-1533 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,402.00
3.779.	Nonpriority creditor's name and mailing address ELITE SPICE INC TABITHA STEWART 7151 MONTEVIDEO RD JESSUP MD 20794-9308 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$255.00
3.780.	Nonpriority creditor's name and mailing address ELIZABETH AUTO WRECKING CO. 450 ROUTE 1 NORTH ELIZABETH NJ 07202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,022.76

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.781.	Nonpriority creditor's name and mailing address ELIZABETH GIBBONS JEFFREY YELEN ESQ ATTORNEY FOR PLAINTIFF YELEN LAW OFFICES 1000 CITIZENS BANK CTR 8 WEST MARKET ST WILKES - BARRE PA 18701 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.782.	Nonpriority creditor's name and mailing address ELIZABETH GIBBONS V NEW ENGLAND MOTOR FREIGHT INC ET AL ROGER A BALLIET 2856 CHURCH HILL RD LEHIGHTON PA 18235 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.783.	Nonpriority creditor's name and mailing address ELIZABETH TOWN GAS P.O. BOX 5412 CAROL STREAM IL 60197-5412 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$244.06

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.784.	Nonpriority creditor's name and mailing address ELK LIGHTING, INC 12 WILLOW LANE NESQUEHONING PA 18240 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13.43
3.785.	Nonpriority creditor's name and mailing address EMC INSURANCE 717 MULBERRY ST DES MOINES IA 50309 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.786.	Nonpriority creditor's name and mailing address EMERALD PROFESSIONAL BRENDA WILD 285 PIERCE ST SOMERSET NJ 08873-1261 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$317.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.787.	Nonpriority creditor's name and mailing address EMERSON %GEODIS LOGISTICS P O BOX 2208 BRENTWOOD TN 37024-2208 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,491.06
3.788.	Nonpriority creditor's name and mailing address EMERSON HEALTHCARE % GEODIS PO BOX 2208 BRENTWOOD TN 37024-2208 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$52,159.46
3.789.	Nonpriority creditor's name and mailing address EMERSON HEALTHCARE % GEODIS PO BOX 2208 BRENTWOOD TN 37024 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,650.04

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.790.	Nonpriority creditor's name and mailing address EMERSON LIEBERT CORPORATION % NVISION GLOBAL 1900 BRANNAN RD STE 300 MCDONOUGH GA 30252 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,062.40
3.791.	Nonpriority creditor's name and mailing address EMERSON LIEBERT CORPORATION C/O NVISION GLOBAL 1900 BRANNAN RD SUITE 300 MCDONOUGH GA 30252-2895 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$439.88
3.792.	Nonpriority creditor's name and mailing address EMERSON SWAN INC ANDY STEPHENS 55 PACELLA PARK DR RANDOLPH MA 02368-1755 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.793.	Nonpriority creditor's name and mailing address EMPACO EQUIPMENT CORPORATION 2 K'S LTD 2958 BRECKSVILLE ROAD RICHFIELD OH 44286 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,888.40
3.794.	Nonpriority creditor's name and mailing address EMPIRE COMMERCIAL SERVICES LP 543 CARY AVENUE STATEN ISLAND NY 10310 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$240.00
3.795.	Nonpriority creditor's name and mailing address EMPIRE DISTRIBUTING JEREMY RUPP 7406 ROUTE 98 ARCADE NY 14009-9713 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$61.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.796.	Nonpriority creditor's name and mailing address EMPIRE FREIGHT LOGISTICS JILL THOMAS 6567 KINNE RD EAST SYRACUSE NY 13057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,480.00
3.797.	Nonpriority creditor's name and mailing address EMPIRE FREIGHT LOGISTICS JILL THOMAS 6567 KINNE RD DEWITT NY 13214-1923 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$69,927.86
3.798.	Nonpriority creditor's name and mailing address EMPIRE FREIGHT LOGISTICS 6567 KINNE RD SYRACUSE NY 13214-1923 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$422.01

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.799.	Nonpriority creditor's name and mailing address EMPIRE INTERNATIONAL 225 MEADOWLANDS PKWY SECAUCUS NJ 07094 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.800.	Nonpriority creditor's name and mailing address EMPLOYMENT GROUP INC 4625 BECKLEY ROAD,BUILDING 200 BATTLE CREEK MI 49015 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,500.00
3.801.	Nonpriority creditor's name and mailing address EMSCO GROUP NANCY BOTTOM 617 CHURCH ST GIRARD PA 16417-1515 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$262.50

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.802.	Nonpriority creditor's name and mailing address ENDURANCE AMERICAN SPECIALTY INS CO 1221 AVE OF THE AMERICAS NEW YORK NY 10020 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.803.	Nonpriority creditor's name and mailing address ENERGY ELECTRIC CO., INC 740 QUAKER HIGHWAY UXBRIDGE MA 01569 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$502.50
3.804.	Nonpriority creditor's name and mailing address ENGLAND*DAVID Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.805.	Nonpriority creditor's name and mailing address ENGLEFIELD, INC 1935 JAMES PARKWAY HEATH OH 43056 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$129,370.36
3.806.	Nonpriority creditor's name and mailing address ENVIROMASTER SERVICES OF CENTRAL NY PO BOX 12350 CHARLOTTE NC 28220 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$464.94
3.807.	Nonpriority creditor's name and mailing address ENVIRONMENTAL AWARENESS CORP 244 EAST BROAD ST TAMAQUA PA 18252 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$471.15

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.808.	Nonpriority creditor's name and mailing address EQUIVEL*VICTOR Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.809.	Nonpriority creditor's name and mailing address EQUIPMENT DEPOT OHIO, INC PO BOX 8500-8352 PHILADELPHIA PA 19178-8352 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,613.01
3.810.	Nonpriority creditor's name and mailing address EQUIPMENT DEPOT PA., INC PO BOX 8500-7647 PHILADELPHIA PA 19178-7647 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,787.84

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.811.	Nonpriority creditor's name and mailing address ERTS EMERGENCY RESPONSE PO BOX 72333 CLEVELAND OH 44192-0002 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$23,306.37
3.812.	Nonpriority creditor's name and mailing address ESCREEN INC PO BOX 25902 OVERLAND PARK KS 66225 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$16,283.50
3.813.	Nonpriority creditor's name and mailing address ESHIPPING LLC EMILY PURVIS PO BOX 14126 PARKVILLE MO 64152-0626 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,270.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.814.	Nonpriority creditor's name and mailing address ESHIPPING LLC P O BOX 14126 PARKVILLE MO 64152-0626 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$173.00
3.815.	Nonpriority creditor's name and mailing address ESMERALDA RAMIREZ HECHT KLEEGER AND DAMASHEK PC JUDD F KLEEGER ESQ 19 WEST 44TH ST STE 1500 NEW YORK NY 10036 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.816.	Nonpriority creditor's name and mailing address ESPOSITO & SONS FREIGHTLINES 6 GRAHAM DR PLATTSBURGH NY 12901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$573.21

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.817.	Nonpriority creditor's name and mailing address ESSENDANT CO % CORPORATE CARRIER RELATIONS DIRECTOR 1 PARKWAY N STE 100 DEERFIELD IL 60015-2559 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.818.	Nonpriority creditor's name and mailing address ESSENDANT CO % CORPORATE CARRIER RELATIONS 1 PARKWAY N STE 100 DEERFIELD IL 60015-2559 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,464.78
3.819.	Nonpriority creditor's name and mailing address ESSENDANT CO DATA 2 P O BOX 61050 FORT MYERS FL 33906-1050 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$6,425.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.820.	Nonpriority creditor's name and mailing address ESSENDANT CO % CORPORATE CARRIER RELA1 1 PARKWAY N STE 100 DEERFIELD IL 60015 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,286.87
3.821.	Nonpriority creditor's name and mailing address ESSEX EQUIPMENT GARY MORSE 26 KELLOGG RD ESSEX JUNCTION VT 05452-2806 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$114.95
3.822.	Nonpriority creditor's name and mailing address ESTEE LAUDER BOB ANDERSEN 80 RULAND RD MELVILLE NY 11747-4211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$7,499.85

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3.823.	Nonpriority creditor's name and mailing address ESTEE LAUDER BOB ANDERSEN 80 RULAND RD MELVILLE NY 11747-4211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,118.01
3.824.	Nonpriority creditor's name and mailing address ETS CORP ADNELYSH DIAZ PO BOX 6810 CAGUAS PR 00725 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,217.58
3.825.	Nonpriority creditor's name and mailing address EVANTON INSURANCE CO 10 PKWY NORTH DEERFIELD IL 60015 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.826.	Nonpriority creditor's name and mailing address EVERSOURCE PO BOX 56005 BOSTON MA 02205-6005 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,709.28
3.827.	Nonpriority creditor's name and mailing address EVERYTHING PLUS INC YITZCHOK FRIEDMAN 1 US 22 HILLSIDE NJ 07205 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.828.	Nonpriority creditor's name and mailing address EXACT DIRECT PAM TURNER 2774 N COBB PKWY SUITE 109-214 KENNESAW GA 30152-3469 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,747.64

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3.829.	Nonpriority creditor's name and mailing address EXACT DIRECT SABRINA X405 09593 34832 2774 N COBB PKWY SUITE 109-214 KENNESAW GA 30152-3469 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$50.00
3.830.	Nonpriority creditor's name and mailing address EXACT DIRECT PAM TURNER 2774 N COBB PKWY STE 109-214 KENNESAW GA 30152-8000 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.831.	Nonpriority creditor's name and mailing address EXAMWORKS, INC 4 BECKER FARM RD ROSELAND NJ 07068 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$500.00

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3.832.	Nonpriority creditor's name and mailing address EXFREIGHT ZETA TIM OR PETERPALLET WAVE 2290 10TH AVE N LAKE WORTH FL 33461-6607 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$406.79
3.833.	Nonpriority creditor's name and mailing address EXFREIGHT ZETA 2290 10TH AVE N STE 501 LAKE WORTH FL 33461 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.834.	Nonpriority creditor's name and mailing address EXFREIGHT ZETA INC NAVIDA DAVIS 2290 10TH AVE N STE 501 LAKE WORTH FL 33461-6607 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$569.65

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3.835.	Nonpriority creditor's name and mailing address EXPEDITORS CARGO INSURANCE BROKERS CECILIA OLIVOS 1015 THIRD AVE 12TH FLR SEATTLE WA 98104-1184 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$322.25
3.836.	Nonpriority creditor's name and mailing address EXPEDITORS CARGO INSURANCE BROKERS LYNDSIE WRIGHT 1015 THIRD AVE 12TH FLR SEATTLE WA 98104-1184 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$561.89
3.837.	Nonpriority creditor's name and mailing address EXPRESS SERVICES, INC. EMPLOYMENT PROFESSIONALS PO BOX 535434 ATLANTA GA 30353-5434 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,169.62

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3.838.	Nonpriority creditor's name and mailing address EXPRESSIONS WHOLESALE ART JIM BITTLE 539 EASTGATE RD SEVIERVILLE TN 37862-4121 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,286.00
3.839.	Nonpriority creditor's name and mailing address EXTREME CW SYSTEMS 28 GENESEE ONEIDA NY 13421 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5.37
3.840.	Nonpriority creditor's name and mailing address EZRA PEISACH 4-53 PLZ RD FAIRLAWN NJ 07410 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.841.	Nonpriority creditor's name and mailing address F B GLASS, INC 530 SCOTTSVILLE CHILI RD SCOTTSVILLE NY 14546 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$356.40
3.842.	Nonpriority creditor's name and mailing address FABRI-CAL CORP ALISON UNDERWOOD 1102 PIEDMONT HWY PIEDMONT SC 29673-9195 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,776.78
3.843.	Nonpriority creditor's name and mailing address FALON PAGE ATTORNEY FOR THE PLAINTIFF HARMON LINDER AND ROGOWSKY 3 PARK AVE 23RD FL SUITE 2300 NEW YORK NY 10016 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.844.	Nonpriority creditor's name and mailing address FALON PAGE V NEW ENGLAND MOTOR FREIGHT INC ET AL KEITH WILLIAMS 235 EAST 8TH AVE ROSELLE NJ 07203 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.845.	Nonpriority creditor's name and mailing address FANCY HEAT CORPORATION JOANNA MASCI 40 VERONICA AVE SOMERSET NJ 08873-3417 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$367.90
3.846.	Nonpriority creditor's name and mailing address FASTENAL COMPANY P.O. BOX 1286 WINONA MN 55987-1286 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,555.77

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3.847.	Nonpriority creditor's name and mailing address FEDEX P.O. BOX 371461 PITTSBURGH PA 15250-7461 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$67.84
3.848.	Nonpriority creditor's name and mailing address FERGUSON ENTERPRISES CLAIMS DEPT 12500 JEFFERSON AVE NEWPORT NEWS VA 23602-4314 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$691.83
3.849.	Nonpriority creditor's name and mailing address FERREIRA*EDUWARDO Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.850.	Nonpriority creditor's name and mailing address FERRELLGAS P O BOX 173940 DENVER CO 80217-3940 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,483.43
3.851.	Nonpriority creditor's name and mailing address FETROW ELECTRIC, INC PO BOX 162 CAMP HILL PA 17001-0162 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$123.00
3.852.	Nonpriority creditor's name and mailing address FHI, LLC P O BOX 890949 CHARLOTTE NC 28289-0949 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,950.00

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3.853.	Nonpriority creditor's name and mailing address FIDELITON CHAD PAUL 1260 KARL CT WAUCONDA IL 60084-1086 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$204.26
3.854.	Nonpriority creditor's name and mailing address FIDELITONE 39550 13 MILE ROAD NOVI MI 48377-2360 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$194.54
3.855.	Nonpriority creditor's name and mailing address FIDELITONE LOGISTICS CHAD PAUL 1260 KARL CT WAUCONDA IL 60084-1086 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,160.98

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3.856.	Nonpriority creditor's name and mailing address FIDELITY AND GUARANTY COMPANY C/O DISCOVERY MANAGERS LTD 30 WATERSIDE DRIVE FARMINGTON CT 06032 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.857.	Nonpriority creditor's name and mailing address FIELDING'S OIL & PROPANE CO,INC 420 US RT 1 PO BOX 364 SCARBOROUGH ME 04070-0364 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$16,726.35
3.858.	Nonpriority creditor's name and mailing address FINDLAY MUNICIPAL COURT 318 DORNEY PLAZA, ROOM 206 P O BOX 826 FINDLAY OH 45839 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$236.00

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3.859.	Nonpriority creditor's name and mailing address FIRESTONE BUILDING PRODUCTS CO TIM HOLLOWAY 200 4TH AVE S NASHVILLE TN 37201-2255 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,931.70
3.860.	Nonpriority creditor's name and mailing address FIRESTONE BUILDING PRODUCTS CO HANK ROEDEL 200 4TH AVE SOUTH NASHVILLE TN 37201-2255 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,620.47
3.861.	Nonpriority creditor's name and mailing address FIRST TRANSIT INC VILNEUVE MESINE ATTORNEY FOR THE PLAINTIFF PARK 6301 IVY LN STE 600 GREENBELT MD 20770 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.862.	Nonpriority creditor's name and mailing address FIRST TRANSIT INC VILNEUVE MESINE V NEW ENGLAND MOTOR FREIGHT INC MALIK GROOMS 4625 SHAMROCK AVE BALTIMORE MD 21206 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.863.	Nonpriority creditor's name and mailing address FISCHER PAPER PRODUCTS ALISON PACHECO 179 IDA AVE ANTIOCH IL 60002-1838 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$750.38
3.864.	Nonpriority creditor's name and mailing address FISHER SCIENTIFIC DENISE YARIA 300 INDUSTRY DR PITTSBURGH PA 15275-1001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.865.	Nonpriority creditor's name and mailing address FISHER SCIENTIFIC P O BOX 61050 FORT MYERS FL 33906-1050 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$6,444.83
3.866.	Nonpriority creditor's name and mailing address FIVE STAR INTERNATIONAL, LLC PO BOX 64006 BALTIMORE MD 21264-4006 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,696.36
3.867.	Nonpriority creditor's name and mailing address FLEET PRIDE P.O. BOX 847118 DALLAS TX 75284-7118 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,936.75

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3.868.	Nonpriority creditor's name and mailing address FLEET PRIDE INC PO BOX 847118 DALLAS TX 75284-7118 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,241.73
3.869.	Nonpriority creditor's name and mailing address FLEETPRIDE, INC 269 STATE STREET NORTH HAVEN CT 06473 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$556.58
3.870.	Nonpriority creditor's name and mailing address FLEETWASH INC. P O BOX 36014 NEWARK NJ 07188-6014 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.76

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.871.	Nonpriority creditor's name and mailing address FLEMINGTON ALUMINUM % ECHO 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,239.73
3.872.	Nonpriority creditor's name and mailing address FLEXPORT INTL LLC PLYSSA 760 MARKET ST 9TH FL SAN FRANCISCO CA 94102-2401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$891.42
3.873.	Nonpriority creditor's name and mailing address FLEXPORT INTL LLC PLYSSA 760 MARKET ST 9TH FL SAN FRANCISCO CA 94102-2401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,716.82

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.874.	Nonpriority creditor's name and mailing address FLEXPORT LLC 760 MARKET ST 9TH FL SAN FRANCISCO CA 94102-2401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$280.91
3.875.	Nonpriority creditor's name and mailing address FLICKERWOOD WINE BRANDON OSBORNE 309 FLICKERWOOD RD KANE PA 16735-3915 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$526.68
3.876.	Nonpriority creditor's name and mailing address FLOW CONTROL ATTN:JUSTIN CURTIN 2 ENTERPRISE COURT SEWELL NJ 08080-4112 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$186.44

Debtor **New England Motor Freight, Inc.**

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3.877.	Nonpriority creditor's name and mailing address FLUOR FEDERAL SOLUTIONS RICK GAMBINI 13455 SUNRISE VALLEY DR HERNDON VA 20171-3295 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,586.87
3.878.	Nonpriority creditor's name and mailing address FOLLETT CORP ERICKA SIMMONS 777 ELSBREE ST FALL RIVER MA 02720-7307 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$155.00
3.879.	Nonpriority creditor's name and mailing address FORBES CHOCOLATE CHERL VOZAR 800 KEN MAR INDUSTRIAL PKWY BROADVIEW HEIGHTS OH 44147-2922 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.880.	Nonpriority creditor's name and mailing address FORBES CHOCOLATE CHERL VOZAR 800 KEN MAR IND PARK BROADVIEW HEIGHTS OH 44147-2922 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,000.00
3.881.	Nonpriority creditor's name and mailing address FORD GUM DALE SCROGER 18 NEWTON AVE AKRON NY 14001-1030 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,514.78
3.882.	Nonpriority creditor's name and mailing address FOREMOST GROUPS WINKY LI 906 MURRAY RD EAST HANOVER NJ 07936-2202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$964.66

Debtor **New England Motor Freight, Inc.**

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3.883.	Nonpriority creditor's name and mailing address FORGE CELLARS RICHARD RAINEY 3775 MATTHEWS ROAD BURDETT NY 14818-9728 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.884.	Nonpriority creditor's name and mailing address FORTIVE- JACOBS VEHI TRANS AUDIT 11 MARSHALL RD STE2D WAPPINGERS FALLS NY 12590 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$343.25
3.885.	Nonpriority creditor's name and mailing address FORTIVE-JACOBS TRANS AUDIT 11 MARSHALL RD STE2D WAPPINGERS FALLS NY 12590 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$593.12

Debtor **New England Motor Freight, Inc.**

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3.886.	Nonpriority creditor's name and mailing address FORTIVE-JACOBS VEHI TRANS AUDIT 11 MARSHALL RD STE2D WAPPINGERS FALLS NY 12590 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,629.85
3.887.	Nonpriority creditor's name and mailing address FORTIV-JACOBS VEHI TRANS AUDIT 11 MARSHALL RD STE2D WAPPINGERS FALLS NY 12590 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$556.48
3.888.	Nonpriority creditor's name and mailing address FOUR IN ONE LLC BERNADETTE JONES 12 ALPHA RD CHELMSFORD MA 01824-4102 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.889.	Nonpriority creditor's name and mailing address FOUR IN ONE LLC BERNADETTE JONES 12 ALPHA RD CHELMSFORD MA 01824-3295 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$254.00
3.890.	Nonpriority creditor's name and mailing address FOUR QUARTERS PLUMBING HEATING & AIR CONDITIONING 2601 RIVER ROAD UNIT 4 CINNAMINSON NJ 08077 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,244.49
3.891.	Nonpriority creditor's name and mailing address FOX ROTHSCHILD, LLP ATTN: ACCOUNTS REC-74 PO BOX 5231 PRINCETON NJ 08543-5231 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$33,041.77

Debtor **New England Motor Freight, Inc.**

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3.892.	Nonpriority creditor's name and mailing address FP WOLL & COMPANY KATHY MC DONOUGH 10060 SANDMEYER LN PHILADELPHIA PA 19116-3502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.893.	Nonpriority creditor's name and mailing address FRAN ROCK, INC 230 WEST NYACK ROAD WEST NYACK NY 10994 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$807.16
3.894.	Nonpriority creditor's name and mailing address FRANCIS BECK AND KIMBERLY BECK ATTORNEY FOR THE PLAINTIFFS HANDLER HENNING AND ROSENBERG LLP ANDREW C SPEARS 1300 LINGLESTOWN RD HARRISBURG PA 17110 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.895.	Nonpriority creditor's name and mailing address FRANCIS BECK ET AL V NEW ENGLAND MOTOR FREIGHT ET AL ATTORNEY FOR THE DEFENDANT SWARTZ CAMPBELL LLC KEVIN CANAVAN TWO LIBERTY PL 50 S 16TH ST FL 28 PHILADELPHIA PA 19102 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.896.	Nonpriority creditor's name and mailing address FRANCIS BECK ET AL V NEW ENGLAND MOTOR FREIGHT ET AL MARK SELLERS 317 WHISKEY SPRING RD DILLSBURG PA 17019 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.897.	Nonpriority creditor's name and mailing address FRANCIS ZUPO BUFFALO 1904 CENTER ST EAST AURORA NY 14052 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$255.01

Debtor **New England Motor Freight, Inc.**

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3.898.	Nonpriority creditor's name and mailing address FRANK MORAN & SONS 1508 JOH AVE HALETHORPE MD 21227-1000 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$225.00
3.899.	Nonpriority creditor's name and mailing address FRASER AIS 320 PENN AVE WEST READING PA 19611 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$124.30
3.900.	Nonpriority creditor's name and mailing address FRED OTT INC JOHN DEERE DEALER 5640 BERKEY SOUTHERN RD BERKEY OH 43504-9655 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$817.51

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.901.	Nonpriority creditor's name and mailing address FREDDIE CARROLL THE PISANCHYN LAW FIRM MICHAEL PISANCHYN AND BRADLEY MOYER ESQS 524 SPRUCE ST SCRANTON PA 18503 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.902.	Nonpriority creditor's name and mailing address FREIGHT RUN P O BOX 250 BROOKFIELD CT 06804-0250 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$227.10
3.903.	Nonpriority creditor's name and mailing address FREIGHT SPECIALISTS INC BOX 503 SYRACUSE NY 13209 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$310.00

Debtor **New England Motor Freight, Inc.**

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3.904.	Nonpriority creditor's name and mailing address FREIGHT SYSTEMS % CAPITAL TRANSPORTATION SOLUTIONS 1915 VAUGHN ROAD KENNESAW GA 30144-4502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$550.00
3.905.	Nonpriority creditor's name and mailing address FREIGHTCOM VINAY SINHA 77 PILLS WORTH RD UNIT 1 BOLTON ON L7E4G4 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,598.11
3.906.	Nonpriority creditor's name and mailing address FREIGHTCOM AISHA CHAUDHRY 77 PILLS WORTH RD UNIT 1 BOLTON ON L7E4G40019 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,300.87

Debtor **New England Motor Freight, Inc.**

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3.907.	Nonpriority creditor's name and mailing address FREIGHTCOM AISHA CHAUDHRY 77 PILLS WORTH RD UNIT BOLTON ON L7E 4G4 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$266.75
3.908.	Nonpriority creditor's name and mailing address FREIGHTQUOTE 901 W CARONDELET DR KANSAS CITY MO 64114-4674 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$431.42
3.909.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM ERICA DANIELS PO BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,717.38

Debtor **New England Motor Freight, Inc.**

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3.910.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM RANDI FRUMP PO BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,266.69
3.911.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM ALEXYS FREEMAN PO BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,671.63
3.912.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM COURTNEY JEFFERSON PO BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,711.81

Debtor **New England Motor Freight, Inc.**

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3.913.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM TAYLOR PRITCHARD PO BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,257.90
3.914.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM ANDRA GETTY PO BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,636.69
3.915.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM AMBER COYLE PO BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,551.25

Debtor **New England Motor Freight, Inc.**

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3.916.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM 901 WEST CARONDELET DRIVE FREIGHT PYMT CENTER KANSAS CITY MO 64114-4674 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,161.69
3.917.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM 901 W CARONDELET DR KANSAS CITY MO 64114-4674 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$281.87
3.918.	Nonpriority creditor's name and mailing address FREIGHTQUOTE.COM AMBER COYLE P O BOX 7001 OVERLAND PARK KS 66207-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,392.61

Debtor **New England Motor Freight, Inc.**

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3.919.	Nonpriority creditor's name and mailing address FRONTIER COMMUNICATIONS PO BOX 740407 CINCINNATI OH 45274-0407 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$64.68
3.920.	Nonpriority creditor's name and mailing address FST LOGISTICS TONYA EASTER 3035 CHARTER ST COLUMBUS OH 43228-4638 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,978.16
3.921.	Nonpriority creditor's name and mailing address FUJI FILM SHERRI YONKEE 850 CENTRAL AVE HANOVER PARK IL 60133-5422 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,094.65

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3.922.	Nonpriority creditor's name and mailing address FUJI PHOTO FILM NATL TRAF LA CAL PRESS 0 P O BOX 4367 LOS ANGELES CA 90078-4367 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$45.00
3.923.	Nonpriority creditor's name and mailing address FUJIFILM/AVERITT SHERRI YONKEE 850 CENTRAL AVE HANOVER PARK IL 60133-5422 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,887.87
3.924.	Nonpriority creditor's name and mailing address FUNK*MICHAEL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.925.	Nonpriority creditor's name and mailing address FURMAN*GREGORY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.926.	Nonpriority creditor's name and mailing address FW WEBB CO DONNA RIVERS 80 PARK AVE WILLISTON VT 05495-9783 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,858.00
3.927.	Nonpriority creditor's name and mailing address G L T VALENTINA QUINTANA 4995 NW 72ND AVE, SUITE 200 MIAMI FL 33166-5643 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,963.60

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3.928.	Nonpriority creditor's name and mailing address G L T BJIMENEZ@GLT-INC.COM 4995 NW 72ND AVE SUITE 200 MIAMI FL 33166-5643 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$619.52
3.929.	Nonpriority creditor's name and mailing address G L T BJIMENEZ@GLT-INC.COM 4995 NW 72ND AVE SUITE 200 MIAMI FL 33166-5643 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$339.20
3.930.	Nonpriority creditor's name and mailing address GABRIELLI KENWORTH OF NJ LLC 2306 US HIGHWAY 130 DAYTON NJ 08810 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$629.28

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3.931.	Nonpriority creditor's name and mailing address GABRIELLI TRUCK SALES PETER PAVONE 3333 CONNOR ST BRONX NY 10475-9382 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,352.12
3.932.	Nonpriority creditor's name and mailing address GAFFNEY*RUSSELL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.933.	Nonpriority creditor's name and mailing address GALAXY FOODS % DSV ROAD INC JESSICA NELSON, CLAIMS MANAGER PO BOX 1685 MEDFORD OR 97501-0130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,461.00

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3.934.	Nonpriority creditor's name and mailing address GALLAGHER & BASSETT ATTN TERRY KING 11245 SLALOM LANE #B COLUMBIA MD 21044 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.935.	Nonpriority creditor's name and mailing address GALLAGHER BASSETT BRIANNA WHITE PO BOX 2934 CLINTON LA 52733 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.936.	Nonpriority creditor's name and mailing address GALLANT AND WEIN 31 NATIONAL RD EDISON NJ 08817 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.937.	Nonpriority creditor's name and mailing address GALVAN INDUSTRIES CHINUE SAUNDERS 7320 GALVAN WAY HARRISBURG NC 28075-4300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,896.88
3.938.	Nonpriority creditor's name and mailing address GAMUT SYSTEMS & SOLUTIONS LLC PO BOX 562357 CHARLOTTE NC 28256 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$59.90
3.939.	Nonpriority creditor's name and mailing address GANSON ROSE EQUIPMENT % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,695.00

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3.940.	Nonpriority creditor's name and mailing address GAP STORES ANGIE BARCOL 1360 DOLWICK DR STE 100 ERLANGER KY 41018-3127 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,137.60
3.941.	Nonpriority creditor's name and mailing address GASKELL'S TOWING, INC 2555 GAR HIGHWAY SWANSEA MA 02777 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,788.25
3.942.	Nonpriority creditor's name and mailing address GATES*GREGORY Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.943.	Nonpriority creditor's name and mailing address GATOR PLUMBING SUPPLY DOROTHY MARIONE 1930 SWATHMORE AVE LAKEWOOD NJ 08701-4547 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.944.	Nonpriority creditor's name and mailing address GCP APPLIED TECH 62 WHITTEMORE AVE CAMBRIDGE MA 02140-1623 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$310.97
3.945.	Nonpriority creditor's name and mailing address GCP APPLIED TECH TRANSAUDIT STE 2D 11 MARSHALL RD WAPPINGERS FALLS NY 12590-4132 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,969.50

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3.946.	Nonpriority creditor's name and mailing address GCR TIRE CENTERS P O BOX 910530 DENVER CO 80291-0530 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,089.09
3.947.	Nonpriority creditor's name and mailing address GEBRUDER WEISS INC CARGO CLAIMS 251 WILLE RD STE C DES PLAINES IL 60018-1861 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$999.00
3.948.	Nonpriority creditor's name and mailing address GEBRUDER WEISS INC PETER FISCHETTI 251 WILLE RD STE C DES PLAINES IL 60016 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,642.97

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3.949.	Nonpriority creditor's name and mailing address GECIO A/S/O ANGEL PEREZ POB 88 WOODBURY NY 11797 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.950.	Nonpriority creditor's name and mailing address GEICO ATTN SUBPOENA REQ 8000 LINCOLN DRIVE EAST STE 300 MARLTON NJ 08053 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$436.00
3.951.	Nonpriority creditor's name and mailing address GEICO A S O FERSCH V NEW ENGLAND MOTOR FREIGHT INC ET AL RICKY COMMO 16 GANNY TER ENFIELD CT 06082 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.952.	Nonpriority creditor's name and mailing address GEICO A S O KENNETH J FERSCH ATTORNEY FOR THE PLAINTIFF LAW OFFICE OF DENNIS MCMANUS 433 SOUTH MAIN ST WEST HARTFORD CT 06110 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.953.	Nonpriority creditor's name and mailing address GEICO A S O KENNETH J FERSCH V NEW ENGLAND MOTOR FREIGHT INC ET AL RICKY COMMO 16 GANNY TER ENFIELD CT 06082 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.954.	Nonpriority creditor's name and mailing address GEICO A/S/O FERSCH ATTORNEY FOR PLAINTIFF COHEN AND WOLF PC 158 DEER HILL AVE DANBURY CT 06810 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.955.	Nonpriority creditor's name and mailing address GEICO AS SUB OF FELICA GRASSIE ATTN: CASHIERS PO BOX 96008 WASHINGTON DC 20090 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,104.69
3.956.	Nonpriority creditor's name and mailing address GEICO GEN. INSUR. CO. AS SUBROGEE OF M DALY & K. DALY LAW OFFICES OF RICKY J. LUCYK JAMES N. DONOVAN, ESQ. 2 HUNTINGTON QUADRANGLE SUITE 2N01 MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.957.	Nonpriority creditor's name and mailing address GEICO INC GLORIA SPRINGER BEVERIDGE CLAIMS PO BOX 9505 FREDERICKSBURG VA 22403 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.958.	Nonpriority creditor's name and mailing address GEICO INDEMNITY CO FOR JOHN GARZILLO LAW OFFICES OF RICKY JLUCYK ALEXANDRA HINTZ ESQ 2 HUNTINGTON QUADRANGLE STE 2N01 MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.959.	Nonpriority creditor's name and mailing address GEICO INDEMNITY CO FOR VAL MAYO LAW OFFICES OF RICKY JLUCYK KATHLEEN A GARVESON ESQ 2 HUNTINGTON QUADRANGLE STE 2N01 MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.960.	Nonpriority creditor's name and mailing address GEICO INDEMNITY CO FOR ZORAIDA MIRANDA LAW OFFICES OF RICKY JLUCYK KATHLEEN A GARVESON ESQ 2 HUNTINGTON QUADRANGLE STE 2N01 MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.961.	Nonpriority creditor's name and mailing address GEICO INS PO BOX 9111 MACON GA 31208 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.962.	Nonpriority creditor's name and mailing address GEICO INSURANCE CO FOR ANNAMARIA MAIAKIS LAW OFFICES OF RICKY JLUCYK KATHLEEN A GARVESON ESQ 2 HUNTINGTON QUADRANGLE STE 2N01 MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.963.	Nonpriority creditor's name and mailing address GEICO INSURANCE FOR ANH HUE DIEC LAW OFFICES OF RICKY JLUCYK JAMES N DONOVAN ESQ 2 HUNTINGTON QUADRANGLE STE 2N01 MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.964.	Nonpriority creditor's name and mailing address GEICO INSURANCE FOR COURTNEY DITTMAR LAW OFFICES OF RICKY JLUCYK JAMES N DONOVAN ESQ 2 HUNTINGTON QUADRANGLE STE 2N01 MELVILLE NY 11747 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.965.	Nonpriority creditor's name and mailing address GEICO V DAVID WOOD ET AL TANGO DICKINSON LORENZO MCDERMOTT ET AL WILLIAM HAHN ESQ 75 MAIN ST PO BOX 192 MILLBURN NJ 07041 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.966.	Nonpriority creditor's name and mailing address GEL SPICE CO INC JACOB HERTZ 48 HOOK ROAD BAYONNE NJ 07002-5007 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$51.00

Debtor **New England Motor Freight, Inc.**

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3.967.	Nonpriority creditor's name and mailing address GENCO CLAIM MANAGEMENT SHARON PINGEL 1400 LOMBARDI AVE STE 204 GREEN BAY WI 54304-3922 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,426.11
3.968.	Nonpriority creditor's name and mailing address GENCO CLAIM MANAGEMENT SHARON PINGEL 1400 LOMBARDI AVE STE 204 GREEN BAY WI 54304 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,381.36
3.969.	Nonpriority creditor's name and mailing address GENERAL CABLE JULIE WEBSTER 4 TESSENEER DR HIGHLAND HEIGHTS KY 41076-9167 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$313.13

Debtor **New England Motor Freight, Inc.**

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3.970.	Nonpriority creditor's name and mailing address GENERAL CABLE JULIE WEBSTER 4 TESSENEER DRIVE HIGHLAND HEIGHTS KY 41076-9167 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,267.37
3.971.	Nonpriority creditor's name and mailing address GENERAL TRUCKING REPAIR, LLC 745 ROUTE 17 NORTH, 2ND FLR CARLSTADT NJ 07072 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$32,082.20
3.972.	Nonpriority creditor's name and mailing address GENERATION LOGISTICS STEVEN SANICHAR 150-10 132ND AVE JAMAICA NY 11434-3500 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,031.67

Debtor **New England Motor Freight, Inc.**

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3.973.	Nonpriority creditor's name and mailing address GEODIS WILSON AMBER MALCHIODI 85 NORTHFIELD AVE EDISON NJ 08837-3806 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$35,153.24
3.974.	Nonpriority creditor's name and mailing address GEORGE BALDWIN 11SCOTT RD TERRYVILLE CT 06786 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.975.	Nonpriority creditor's name and mailing address GEORGIA PACIFIC SHARON PINGEL PO BOX 281523 ATLANTA GA 30384-1523 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,084.79

Debtor **New England Motor Freight, Inc.**

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3.976.	Nonpriority creditor's name and mailing address GHENT MANUFACTURING INC CORY BOWERS 2999 HENKLE DR LEBANON OH 45036-9260 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,497.32
3.977.	Nonpriority creditor's name and mailing address GINSEY IND INC 2078 CENTER SQUARE RD SWEDESBORO NJ 08085-1703 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$657.18
3.978.	Nonpriority creditor's name and mailing address GINSEY INDUSTRIES KELLY WOOD 2078 CENTER SQUARE RD SWEDESBORO NJ 08085-1703 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,396.13

Debtor **New England Motor Freight, Inc.**

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3.979.	Nonpriority creditor's name and mailing address GITI CHR 14800 CHARLSON RD #2100 EDEN PRAIRIE MN 55344 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$113.25
3.980.	Nonpriority creditor's name and mailing address GIVENS LOGISTICS LISA REYNARD 1720 S MILITARY HWY CHESAPEAKE VA 23320-2612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,831.93
3.981.	Nonpriority creditor's name and mailing address GIVENS LOGISTICS MICHAEL FAIRCHILD 1720 S MILITARY HWY CHESAPEAKE VA 23320-2612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,565.44

Debtor **New England Motor Freight, Inc.**

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3.982.	Nonpriority creditor's name and mailing address GL & V USA, INC ATTN: KIM BUTLAND 1 CELLU DRIVE □ SUITE 200 NASHUA NH 03063-1008 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$494.41
3.983.	Nonpriority creditor's name and mailing address GLADHILL TRACTOR MART, INC 5509 MT ZION ROAD FREDERICK MD 21703-4500 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$247.53
3.984.	Nonpriority creditor's name and mailing address GLADIEUX TRADING & MARKETING 4133 NEW HAVEN AVENUE FORT WAYNE IN 46803-1643 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$35,631.92

Debtor **New England Motor Freight, Inc.**

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3.985.	Nonpriority creditor's name and mailing address GLAMBIA PERFORMANCE NUTRITION %TRANSPLACE TEXAS LP, TAMMY SHOOK P O BOX 425 LOWELL AR 72745-0425 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,240.00
3.986.	Nonpriority creditor's name and mailing address GLANBIA PERFORMANCE NUTRITION % TRANSPLACE TEXAS LP PO BOX 518 LOWELL AR 72745-0518 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,881.28
3.987.	Nonpriority creditor's name and mailing address GLANBIA PERFORMANCE NUTRITION C/O TRANSPLACE TEXAS LP PO BOX 518 LOWELL AR 72745-0518 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$306.72

Debtor **New England Motor Freight, Inc.**

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3.988.	Nonpriority creditor's name and mailing address GLASFLOSS IND JOANNE KING 310 MAIN AVE WAY SE HICKORY NC 28602-3513 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$210.18
3.989.	Nonpriority creditor's name and mailing address GLASFLOSS INDUSTRIES JOANNE KING 310 MAIN AVE WAY SE HICKORY NC 28602-3513 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$502.56
3.990.	Nonpriority creditor's name and mailing address GLEN PECK ELECTRIC INC. 300 FOOTE STREET MIDDLEBURY VT 05753 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,682.00

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3.991.	Nonpriority creditor's name and mailing address GLOBAL EQUIPMENT MELISSA CAPPS 2505 MILL CENTER PKWY STE 100 BUFORD GA 30518-3700 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,222.93
3.992.	Nonpriority creditor's name and mailing address GLOBAL INGREDIENTS GRIFFITH JONES 317 9TH AVENUE PATERSON NJ 07514-2310 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$413.36
3.993.	Nonpriority creditor's name and mailing address GLOBAL TRANSPORT LOGISTICS LARRY DI PASQUALE 208 HARRISTOWN RD STE 201 GLEN ROCK NJ 07452-3308 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,184.54

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3.994.	Nonpriority creditor's name and mailing address GLOBAL TRANSPORT LOGISTICS KIMBERLY ROTH 208 HARRISTOWN RD STE 201 GLEN ROCK NJ 07452-3308 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,172.32
3.995.	Nonpriority creditor's name and mailing address GLOBAL TRANSPORT LOGISTICS KIMBERLY ROTH 208 HARRISTOWN RD STE 201 GLEN ROCK NJ 07452-3308 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,828.98
3.996.	Nonpriority creditor's name and mailing address GLOBAL TRANZ JOHN THOMPSON PO BOX 6348 SCOTTSDALE AZ 85251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,626.80

Debtor **New England Motor Freight, Inc.**

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3.997.	Nonpriority creditor's name and mailing address GLOBAL TRANZ STEPHANIE ORTIZ PO BOX 6348 SCOTTSDALE AZ 85251-2611 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,547.10
3.998.	Nonpriority creditor's name and mailing address GLOBAL TRANZ CLAIMS DEPT PO BOX 6348 SCOTTSDALE AZ 85251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,253.12
3.999.	Nonpriority creditor's name and mailing address GLOBAL TRANZ ATTN LEGAL DEPT 5415 E. HIGH ST. PHOENIX AZ 85054 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$83.03

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3.1000. Nonpriority creditor's name and mailing address GLOBAL TRANZ C/O GT FREIGHT AUDIT PYMT PO BOX 6348 SCOTTSDALE AZ 85251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$539.31
3.1001. Nonpriority creditor's name and mailing address GLOBAL TRANZ PAT O'MALLEY PO BOX 160 GOSHEN AR 72735-0160 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$425.00
3.1002. Nonpriority creditor's name and mailing address GLOBAL TRANZ STEPHANIE ORTIZ PO BOX 6348 SCOTTSDALE AZ 85251-4569 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,825.00

Debtor **New England Motor Freight, Inc.**

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3.1003. Nonpriority creditor's name and mailing address GLOBALTRANZ SHANNON X104(CONTROLLER) P O BOX 6348 SCOTTSDALE AZ 85258-1013 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,140.48
3.1004. Nonpriority creditor's name and mailing address GLOBALTRANZ 7350 N.DOBSON RD SCOTTSDALE AZ 85258 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$346.81
3.1005. Nonpriority creditor's name and mailing address GLOBALTRANZ ENT INC SHANNON X104(CONTROLLER) P O BOX 6348 SCOTTSDALE AZ 85258-1013 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$707.95

Debtor **New England Motor Freight, Inc.**

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3.1006. Nonpriority creditor's name and mailing address GLOSTER FURNITURE WENDY THOMASON PO BOX 738 SOUTH BOSTON VA 24592-0738 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,405.75
3.1007. Nonpriority creditor's name and mailing address GLT 4995 NW 72ND AVE STE 200 MIAMI FL 33166 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$283.18
3.1008. Nonpriority creditor's name and mailing address GLT 4995 NW 72ND AVE SUITE 200 MIAMI FL 33166 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$111.70

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3.1009. Nonpriority creditor's name and mailing address GLT INC CARLOS VALEZ 4995 NW 72ND AVE, STE 200 MIAMI FL 33166-5643 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25,000.00
3.1010. Nonpriority creditor's name and mailing address GLT TRANS GROUP 4995 NW 72ND AVE STE 200 MIAMI FL 33166 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$166.44
3.1011. Nonpriority creditor's name and mailing address GOETZ ENERGY CORPORATION P.O. BOX A BUFFALO NY 14217-0305 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$39,422.69

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3.1012. Nonpriority creditor's name and mailing address GOJO INDUSTRIES FREIGHT CLAIMS P O BOX 991 AKRON OH 44309-0991 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,117.00
3.1013. Nonpriority creditor's name and mailing address GOJO INDUSTRIES FREIGHT CLAIMS PO BOX 991 AKRON OH 44309-0991 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,725.14
3.1014. Nonpriority creditor's name and mailing address GOJO INDUSTRIES GOJO CLAIMS ADMINISTRATOR PO BOX 991 AKRON OH 44309-0991 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$47,416.34

Debtor **New England Motor Freight, Inc.**

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3.1015. Nonpriority creditor's name and mailing address GOJO INDUSTRIES GOJO CLAIMS ADMINISTRATION PO BOX 991 AKRON OH 44309-0991 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$962.38
3.1016. Nonpriority creditor's name and mailing address GOLDEN PYRAMID ENTERPRISES, INC 2854 W VERMONT STREET BLUE ISLAND IL 60406 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,330.48
3.1017. Nonpriority creditor's name and mailing address GOLDFARB ELECTRIC LARRY HILLIARD 116 VIRGINIA ST E CHARLESTON WV 25301-2519 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$24.05

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1018. Nonpriority creditor's name and mailing address GOLUB CORP ATTN: TRAFFIC-MB17/B ROBERTS 501 DUANESBURG ROAD SCHENECTADY NY 12306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,656.27
3.1019. Nonpriority creditor's name and mailing address GONZAGA*STALIN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1020. Nonpriority creditor's name and mailing address GOOD FOOD INC CHESTER MILLISOCK 4960 HORSESHOE PIKE HONEY BROOK PA 19344-1361 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$784.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1021. Nonpriority creditor's name and mailing address GOODING COMPANY INC BRIANNA BARRETT 5568 DAVISON RD LOCKPORT NY 14094-9090 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,130.44
3.1022. Nonpriority creditor's name and mailing address GOODMAN REICHWALD JOHN DEERE CO PO BOX 26067 MILWAUKEE WI 53226-0067 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,199.59
3.1023. Nonpriority creditor's name and mailing address GOODYEAR TIRE & RBR % LOGISTIC CONCEPTS PO BOX 362 CUYAHOGA FALLS OH 44222-0362 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,051.40

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1024. Nonpriority creditor's name and mailing address GOODYEAR TIRE & RBR CO %LOGISTIC CONCEPTS PO BOX 362 CUYAHOGA FALLS OH 44222-0362 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$105.50
3.1025. Nonpriority creditor's name and mailing address GOODYEAR TIRE & RUBBER P.O. BOX 277808 ATLANTA GA 30384-7808 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,923.84
3.1026. Nonpriority creditor's name and mailing address GOODYEAR TIRE & RUBBER CO LOGISTIC CONCEPTS PO BOX 362 CUYAHOGA FALLS OH 44222-0362 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$523.28

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1027. **Nonpriority creditor's name and mailing address**

GOODYEAR TIRE & RUBBER COMPANY
% LOGISTIC CONCEPTS
PO BOX 362
CUYAHOGA FALLS OH 44222-0362

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$186.70

3.1028. **Nonpriority creditor's name and mailing address**

GRANAT INDUSTRIES
% WORLDWIDE EXPRESS
2323 VICTORY AVE STE 1600
DALLAS TX 75219-7657

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1029. **Nonpriority creditor's name and mailing address**

GRAND*JOCEPHUS
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1030. **Nonpriority creditor's name and mailing address**

GRATTON*GERARD
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1031. **Nonpriority creditor's name and mailing address**

GRAY METAL PRODUCTS
KENNETH BREEMES
495 ROCHESTER ST
AVON NY 14414-9503

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,992.87

3.1032. **Nonpriority creditor's name and mailing address**

GRAY*JOHN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1033. Nonpriority creditor's name and mailing address GRAYBAR ELECTRIC STACEY DORAN 105 FIELDCREST AVE STE 602 EDISON NJ 08837-3628 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1034. Nonpriority creditor's name and mailing address GRAYBAR ELECTRIC CO SANDRA DOOLEY 350 METRO PARK ROCHESTER NY 14623-2614 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$140.00
3.1035. Nonpriority creditor's name and mailing address GRAZIANO*THOMAS Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1036. **Nonpriority creditor's name and mailing address**

GREAT AMERICAN ASSURANCE CO
301 E FOURTH ST
CINCINNATI OH 45202

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1037. **Nonpriority creditor's name and mailing address**

GREAT DANE LLC
BOX 67
SAVANNAH GA 31402

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

EQUIPMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$766,575.00

3.1038. **Nonpriority creditor's name and mailing address**

GREAT LAKES FULFILLM
KIM A/P CONTACT EXT 201
41 CANAL STREET
LEWISTON ME 04240-7764

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$437.23

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1039. Nonpriority creditor's name and mailing address GREEN LIGHT NATIONAL % SCHNEIDER LOGISTICS INC PO BOX 78158 MILWAUKEE WI 53278-8158 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,030.00
3.1040. Nonpriority creditor's name and mailing address GREEN MOUNTAIN ELECTRIC ROSE HARRINGTON 356 RATHE RD COLCHESTER VT 05446-1505 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,017.80
3.1041. Nonpriority creditor's name and mailing address GREEN MOUNTAIN FEEDS TAMARA MILLER 65 MAIN ST BETHEL VT 05032-9065 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1042. Nonpriority creditor's name and mailing address GREEN MOUNTAIN POWER CORP PO BOX 1611 BRATTLESBORO VT 05302-1611 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,649.29
3.1043. Nonpriority creditor's name and mailing address GREEN VALLEY PECAN CO JENNIFER HIGHTOWER 1525 E SAHUARITA RD SAHUARITA AZ 85629-8001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,152.74
3.1044. Nonpriority creditor's name and mailing address GREEN WORLDWIDE % CTS 1915 VAUGHN RD KENNESAW GA 30144-4502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$21,332.50

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1045. Nonpriority creditor's name and mailing address GREENWAY EQUIPMENT SALES GARY WHITTINGTON II 1701 HAMMOND ST BANGOR ME 04401-1112 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,070.76
3.1046. Nonpriority creditor's name and mailing address GRM DOCUMENT MANAGEMENT ROI RPOCESSING 2002 SOUTH EAST STREET INDIANAPOLIS IN 46225 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4.50
3.1047. Nonpriority creditor's name and mailing address GROLEMUND*ROBERTO Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1048. Nonpriority creditor's name and mailing address GROUNDWATER & ENVIRONMENTAL SERVICES, INC 440 CREAMERY WAY, STE 500 EXTON PA 19341-2577 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,558.19
3.1049. Nonpriority creditor's name and mailing address GSI LLC 3086 MOMENTUM PLACE CHICAGO IL 60689-5330 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,197.00
3.1050. Nonpriority creditor's name and mailing address GSM ROOFING 345 S READING ROAD EPHRATA PA 17522 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$56,735.37

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1051. Nonpriority creditor's name and mailing address GTT COMMUNICATIONS PO BOX 842630 DALLAS TX 75284-2630 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$90.20
3.1052. Nonpriority creditor's name and mailing address GUARANTY FUND MANAGEMENT SERVICES Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WORKERS' COMPENSATION PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,000.00
3.1053. Nonpriority creditor's name and mailing address GUNNING & LAFAZIA, INC 33 COLLEGE HILL RD STE 25B WARWICK RI 02886 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,299.95

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1054. Nonpriority creditor's name and mailing address GUTTMAN OIL CO PO BOX 536250 PITTSBURGH PA 15253-5904 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$66,182.80
3.1055. Nonpriority creditor's name and mailing address H & S TOWING SERV, INC 4180 CHAMBERS HILL ROAD HARRISBURG PA 17111 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,394.80
3.1056. Nonpriority creditor's name and mailing address H&M EQUIPMENT COMPANY INC CYNTHIA RAY 4551 STATE HWY 30 AMSTERDAM NY 12010-6211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$816.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1057. Nonpriority creditor's name and mailing address</p> <p>H&R CONSTRUCTION C/O FRANKLIN GLOBAL P O BOX 100 RANSOMVILLE NY 14131-0100</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$912.25</p>
<p>3.1058. Nonpriority creditor's name and mailing address</p> <p>HAAS INTL GROUP % ODYSSEY LOGISTICS PO BOX 19749 DEPT 123 CHARLOTTE NC 28219-9749</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$7,557.60</p>
<p>3.1059. Nonpriority creditor's name and mailing address</p> <p>HAB-DIT (ER) P.O. BOX 995 BANGOR PA 18013-0995</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$214.09</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1060. Nonpriority creditor's name and mailing address HAGERSTOWN AUTOMOTIVE, INC. 71 WEST LEE STREET HAGERSTOWN MD 21740 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$288.27
3.1061. Nonpriority creditor's name and mailing address HAINES JONES & CADBURY MELISSA BILBREY 517 MICA CIR CROSSVILLE TN 38571-2849 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$319.90
3.1062. Nonpriority creditor's name and mailing address HALE TRAILER & BRAKE & WHEEL P. O. BOX 1400 VOORHEES NJ 08043 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,107.87

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1063. **Nonpriority creditor's name and mailing address**

HAMMER'S TOWING, LLC
PO BOX 80282
TOLEDO OH 43608

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$125.00

3.1064. **Nonpriority creditor's name and mailing address**

HAMMOND MFG
KATHY JAKUBOWSKI
475 CAYUGA RD STE 100
CHEEKTOWAGA NY 14225-1309

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,438.57

3.1065. **Nonpriority creditor's name and mailing address**

HANDY*BRIAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1066. **Nonpriority creditor's name and mailing address**

HANSON SIGN COMPANY
SUSAN LYNDSLEY
82 CARTER ST
FALCONER NY 14733-1406

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1067. **Nonpriority creditor's name and mailing address**

HAR ADHESIVES
DENNIS GROSEL
3940 BROADWAY
CHEEKTOWAGA NY 14227-1104

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,507.86

3.1068. **Nonpriority creditor's name and mailing address**

HARBORSIDE LOGISTICS
PATRICIA CONRAD
94 COMMERCIAL ST STE 201
PORTLAND ME 04101-4738

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1069. **Nonpriority creditor's name and mailing address**

HARDWICK*GREGORY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1070. **Nonpriority creditor's name and mailing address**

HARDWOOD PRODUCTS CO
RUTH LONDON
PO BOX 149
GUILFORD ME 04443-0149

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$700.00

3.1071. **Nonpriority creditor's name and mailing address**

HARFORD*CHRISTOPHER
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1072. Nonpriority creditor's name and mailing address HARMONY PRINTING 2290 WEST COUNTY LINE RD. SUITE LL6 JACKSON NJ 08527	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$371.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1073. Nonpriority creditor's name and mailing address HARRINGTON*WILLIAM Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1074. Nonpriority creditor's name and mailing address HARRIS FIRE PROTECTION CO INC 50 KANE STREET BALTIMORE MD 21224	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$350.11
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1075. Nonpriority creditor's name and mailing address HARRIS TEA CO KRISTIN VAN PELT 344 NEW ALBANY RD MOORESTOWN NJ 08057-1167 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$815.34
3.1076. Nonpriority creditor's name and mailing address HARRIS*IVAN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1077. Nonpriority creditor's name and mailing address HARRS AUTO GLASS, INC 2630 PARSONS AVE COLUMBUS OH 43207 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$205.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1078. **Nonpriority creditor's name and mailing address**

HARTFORD FIRE INSURANCE CO
ONE HARTFORD PLZ
HARTFORD CT 06155-0001

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1079. **Nonpriority creditor's name and mailing address**

HARTFORD FIRE INSURANCE COMPANY
THOMAS MAKUCH
Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

WORKERS' COMPENSATION PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$6,108,373.00

3.1080. **Nonpriority creditor's name and mailing address**

HARTZ MOUNTAIN CO
ROBERT MILLER
305 BROADWAY
JERSEY CITY NJ 07306-6712

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,233.68

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1081. Nonpriority creditor's name and mailing address</p> <p>HASBRO INC PAULA ALDCROFT 200 NARRAGANSETT PARK DR PAWTUCKET RI 02862-3124</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$13,910.88</p>
<p>3.1082. Nonpriority creditor's name and mailing address</p> <p>HATFIELD & ASSOCIATES TIFFANY OSBAHR 5100 POPLAR AVE STE 3119 MEMPHIS TN 38137-4000</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$6,100.00</p>
<p>3.1083. Nonpriority creditor's name and mailing address</p> <p>HAUSER'S TRUCK SERVICE INC 850 CHURCH STREET CATASAUQUA PA 18032</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$5,700.55</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1084. Nonpriority creditor's name and mailing address HAZLETON EQUIPMENT CO 441 S CHURCH STREET HAZLETON PA 18201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,547.49
3.1085. Nonpriority creditor's name and mailing address HAZLETON OIL & ENVIRONMENTAL 300 S TAMAQUA ST HAZLETON PA 18201-7913 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,025.00
3.1086. Nonpriority creditor's name and mailing address HD SUPPLY VANESSA HUDSON 3400 CUMBERLAND BLVD 7TH FLR ATLANTA GA 30339-4435 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$243.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1087. Nonpriority creditor's name and mailing address HD SUPPLY DEJWAUN HARRIS 3400 CUMBERLAND BLVD 7TH FLR ATLANTA GA 30339-4435 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,335.88
3.1088. Nonpriority creditor's name and mailing address HD SUPPLY FM FREIGHT CLAIMS 3400 CUMBERLAND BLVD 7TH FLR ATLANTA GA 30339-4435 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,714.54
3.1089. Nonpriority creditor's name and mailing address HD SUPPLY DEJWAUN HARRIS 3400 CUMBERLAND BLVD 7TH FLR ATLANTA GA 30339-4435 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$537.69

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1090. Nonpriority creditor's name and mailing address HD SUPPLY FM FREIGHT CLAIMS 3400 CUMBERLAND BLVD 7T ATLANTA GA 30339-1113 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,384.44
3.1091. Nonpriority creditor's name and mailing address HD SUPPLY FACILITIES MAINTENANCE JESSICA ARNOLD 101 RIVERVIEW PKWY SANTEE CA 92071-5805 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$654.72
3.1092. Nonpriority creditor's name and mailing address HEALTHTRUST PURCHASING GROUP HPG C/O WELLS FARGO,#090143067 FOR MOLD RITE PLASTICS P O BOX 751576 CHARLOTTE NC 28275-1576 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$447.96

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1093. Nonpriority creditor's name and mailing address HEARTH & HOME % WILLIAMS ASSOCIATES INC 405 E 78TH ST BLOOMINGTON MN 55420-1251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$948.60
3.1094. Nonpriority creditor's name and mailing address HEARTH & HOME C/O WILLIAMS & ASSOCIATES 405 E 78TH STREET BLOOMINGTON MN 55420-1251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$299.00
3.1095. Nonpriority creditor's name and mailing address HEAVY DUTY PARTS 29787 NETWORK PLACE CHICAGO IL 60673-1787 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$282.62

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1096. **Nonpriority creditor's name and mailing address**

HENDERSHOT*EDWARD
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1097. **Nonpriority creditor's name and mailing address**

HENDERSHOT*EDWARD
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1098. **Nonpriority creditor's name and mailing address**

HENRY JASKULSKI
ROBB LEONARD MULVIHILL LLP
R SEAN OCONNELL ESQ
BNY MELLON CENTER
500 GRANT ST STE 2300
PITTSBURGH PA 15219

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1099. Nonpriority creditor's name and mailing address HERCULES TRUCK&TRAILER REPAIR 2 NEW STREET EAST RUTHERFORD NJ 07073 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$29,829.56
3.1100. Nonpriority creditor's name and mailing address HERITAGE MAINTENANCE PROD, LLC P O BOX 2178 BLUE BELL PA 19422-2178 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$471.98
3.1101. Nonpriority creditor's name and mailing address HERITAGE-CRYSTAL CLEAN, LLC 13621 COLLECTIONS CENTER DRIVE CHICAGO IL 60693-0136 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,591.07

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1102. Nonpriority creditor's name and mailing address HERSHEY CREAMERY COMPANY MARLENE SMITH 301 S. CAMERON ST. HARRISBURG PA 17101-2815 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$516.00
3.1103. Nonpriority creditor's name and mailing address HERTZ FURNITURE STACEY FORBES 170 WILLIAMS DR RAMSEY NJ 07446-2907 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$755.69
3.1104. Nonpriority creditor's name and mailing address HFC PRESTIGE RAMON CORDOVA 10123 ALLIANCE RD STE 320 CINCINNATI OH 45252 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$195.45

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1105. Nonpriority creditor's name and mailing address</p> <p>HI DE LINERS INC TERRY ALLEN 131 W MAIN ST ORANGE MA 01364-1150</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,111.13</p>
<p>3.1106. Nonpriority creditor's name and mailing address</p> <p>HI LOGISTICS NJ INC CHRISTIAN KIM 910 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632-3306</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$6,409.00</p>
<p>3.1107. Nonpriority creditor's name and mailing address</p> <p>HIGBEE*LEON Address Intentionally Omitted</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>PENDING WORKERS' COMPENSATION CLAIM</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1108. **Nonpriority creditor's name and mailing address**

HIGHPIAINS LLC
16 HIGH ST
PLAINVILLE MA 02762

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1109. **Nonpriority creditor's name and mailing address**

HIGH-TECH AUTO MACHINE SHOP
404 BRIDGE STREET
WEISSPORT PA 18235

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$15,106.00

3.1110. **Nonpriority creditor's name and mailing address**

HILLSIDE PLASTICS CO
SANDY JIMENEZ
125 LONG AVE
HILLSIDE NJ 07205-2350

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$16,650.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1111. Nonpriority creditor's name and mailing address HIRZEL CANNING ARUN TRIPATHI 411 LEMONYNE RD NORTHWOOD OH 43619-9727 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,000.00
3.1112. Nonpriority creditor's name and mailing address HNI CORPORATION % SCHNEIDER LOGISTICS PO BOX 78158 MILWAUKEE WI 53278-8158 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,069.64
3.1113. Nonpriority creditor's name and mailing address HOBART CORP BRENDA HYLAND 3775 LAKE PARK DR COVINGTON KY 41017-9603 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,250.76

Debtor **New England Motor Freight, Inc.**

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<p>3.1114. Nonpriority creditor's name and mailing address</p> <p>HOBART CORPORATION BRENDA HYLAND 3775 LAKE PARK DR COVINGTON KY 41017-9603</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$11,970.96</p>
<p>3.1115. Nonpriority creditor's name and mailing address</p> <p>HODOSH, LYON & HAMMER, LTD 41 COMSTOCK PKWY SUITE 101 CRANSTON RI 02921</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$273.38</p>
<p>3.1116. Nonpriority creditor's name and mailing address</p> <p>HOLLISTER INC % ECHO GLOBAL LOGIST 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$187.50</p>

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3.1117. Nonpriority creditor's name and mailing address HOME DEPOT 2450 CUMBERLAND PKWY TERRY ECKER ATLANTA GA 30339 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$15,937.96
3.1118. Nonpriority creditor's name and mailing address HOME DEPOT %CONDATA GLOBAL 9830 WEST 190TH ST, STE M MOKENA IL 60448-5603 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,496.85
3.1119. Nonpriority creditor's name and mailing address HOME DEPOT CREDIT SERVICES DEPT *5313 P O BOX 78047 PHOENIX AZ 85062-8047 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,005.88

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3.1120. **Nonpriority creditor's name and mailing address**

HOME DEPOT USA INC
2455 PACES FERRY RD
BUILDING C20
ATLANTA GA 30339

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1121. **Nonpriority creditor's name and mailing address**

HOMEGOODS
DORIS BAGLEY
770 COCHITUATE RD
FRAMINGHAM MA 01701-4666

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$9,853.00

3.1122. **Nonpriority creditor's name and mailing address**

HOMELITE CONSUMER PRODUCTS
MICHAEL MC MILLAN
203 ORANGE WAY
ANDERSON SC 29621-7673

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$15,269.86

Debtor **New England Motor Freight, Inc.**

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3.1123. **Nonpriority creditor's name and mailing address**

HOMER*STANLEY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1124. **Nonpriority creditor's name and mailing address**

HONEYWELL ADI
SYDNEY WHELPDALE
346 BELT LINE RD STE 100
COPPELL TX 75019-4721

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,235.94

3.1125. **Nonpriority creditor's name and mailing address**

HOP & WINE BEVERAGE
% LRG
8500 W 110TH ST STE 300
OVERLAND PARK KS 66210-1874

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,120.00

Debtor **New England Motor Freight, Inc.**

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3.1126. Nonpriority creditor's name and mailing address HOP INDUSTRIES CORPORATION TARA GANESH PO BOX 188 LYNDHURST NJ 07071-0188 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,669.70
3.1127. Nonpriority creditor's name and mailing address HORIZON SOLUTIONS LEONARD KUNICKI PO BOX 97 GUILDERLAND CENTER NY 12085-0097 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,512.90
3.1128. Nonpriority creditor's name and mailing address HORNINGS SUPPLY JANICE DAVIES 23 PARK LA HEGINS PA 17938-9089 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$44.00

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3.1129. Nonpriority creditor's name and mailing address HORNINGS SUPPLY KATHY MILLER 23 PARK LA HEGINS PA 17938-9089 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$504.00
3.1130. Nonpriority creditor's name and mailing address HORNINGS SUPPLY KATHY MILLER 23 PARK LA HEGINS PA 17938-9089 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$306.00
3.1131. Nonpriority creditor's name and mailing address HORNING'S SUPPLY KATHY MILLER 23 PARK LA HEGINS PA 17938-9089 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.1132. Nonpriority creditor's name and mailing address HOSPITAL FOR SPECIAL SURGERY IMAGE RECORDS DEPT 525 WEST 71ST STREET NEW YORK NY 10021 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$142.00
3.1133. Nonpriority creditor's name and mailing address HOSPITALITY BRANDS NANCY KAMPHAUSEN 185 INDUSTRIAL AVE RIDGEFIELD PARK NJ 07660-1333 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,324.26
3.1134. Nonpriority creditor's name and mailing address HOWELL*JASON Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.1135. **Nonpriority creditor's name and mailing address**

HOWELL*WARREN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1136. **Nonpriority creditor's name and mailing address**

HUB CITY TERMINALS
CARGO CLAIMS
36258 TREASURY CTR
CHICAGO IL 60694-6200

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1137. **Nonpriority creditor's name and mailing address**

HUB CITY TERMINALS
CARGO CLAIMS
36258 TREASURY CENTER
CHICAGO IL 60694-0001

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$100.00

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3.1138. Nonpriority creditor's name and mailing address HUB CITY TERMINALS INC CARGO CLAIMS 36258 TREASURY CENTER CHICAGO IL 60694-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1139. Nonpriority creditor's name and mailing address HUB CITY TERMINALS INC CLAIMS 36258 TREASURY CENTER CHICAGO IL 60694-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,014.69
3.1140. Nonpriority creditor's name and mailing address HUB GROUP INC GRACE SEMTANA 2000 CLEARWATER DR OAK BROOK IL 60523-8809 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,639.09

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3.1141. **Nonpriority creditor's name and mailing address**

HUNT*RICHARD
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1142. **Nonpriority creditor's name and mailing address**

HUNTER METAL INDUSTRIES INC
% SCHNEIDER LOGISTICS INC
PO BOX 78158
MILWAUKEE WI 53278-8158

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$653.42

3.1143. **Nonpriority creditor's name and mailing address**

HUNTER TRUCK SALES & SERVICE
DEPT 105
P O BOX 820849
PHILADELPHIA PA 19182-0849

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$84.99

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3.1144. Nonpriority creditor's name and mailing address HURLEY AND DAVID INC 90 FISK AVENUE SPRINGFIELD MA 01107 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,211.88
3.1145. Nonpriority creditor's name and mailing address HYATTS GRAPHIC SUPPLY KIRSTIN ANDERSON 910 MAIN ST BUFFALO NY 14202-1403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,186.57
3.1146. Nonpriority creditor's name and mailing address HYDRO % AFS LOGISTICS LLC PO BOX 18170 SHREVEPORT LA 71138-1170 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$585.11

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<p>3.1147. Nonpriority creditor's name and mailing address</p> <p>HYGRADE EVA SCHWIMMER 30 WARSOFF PL BROOKLYN NY 11205-1638</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,514.40</p>
<p>3.1148. Nonpriority creditor's name and mailing address</p> <p>I PARK 2070 RT 52 BUILDING 320 HOPEWELL JET NY 12533</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OPEN AUTO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>
<p>3.1149. Nonpriority creditor's name and mailing address</p> <p>I.H. A.H. A.H. (ALL MINORS) C/O VITAL & VITAL, LC MATHEW R. OLIVER, ESQ. 536 FTH AVENUE HUNTINGTON WV 25701</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>LITIGATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

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3.1150. **Nonpriority creditor's name and mailing address**

IAM NATIONAL PENSION FUND
KIMBERLY MONNIG CONTROLLER
1300 CONNECTICUT AVE STE 300
WASHINGTON DC 20036

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

IAM NATIONAL PENSION FUND

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,676,814.00

3.1151. **Nonpriority creditor's name and mailing address**

IBRAIMOVE*GIANNI
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1152. **Nonpriority creditor's name and mailing address**

ILLINOIS UNION INSURANCE CO
525 WEST MONROE ST
CHICAGO IL 60661

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.1153. Nonpriority creditor's name and mailing address IMA LIFE NORTH AMERICA INC DEBRA DICKMAN 2175 MILITARY RD TONAWANDA NY 14150-6001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$545.93
3.1154. Nonpriority creditor's name and mailing address IMAGE FLEET GRAPHICS 4410 DELL AVE NORTH BERGEN NJ 07047 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$980.00
3.1155. Nonpriority creditor's name and mailing address IMAGO % VEECO 6801 WESTSIDE AVE NORTH BERGEN NJ 07047-6441 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,148.00

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<p>3.1156. Nonpriority creditor's name and mailing address</p> <p>IMPERIAL BAG & PAPER DEBRALUZ HERNANDEZ 255 ROUTE 1 & 9 JERSEY CITY NJ 07306-2584</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,603.00</p>
<p>3.1157. Nonpriority creditor's name and mailing address</p> <p>IMPERIAL BAG & PAPER PO BOX 362 CUYAHOGA FALLS OH 44222-0362</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,605.09</p>
<p>3.1158. Nonpriority creditor's name and mailing address</p> <p>IMPERIAL MANUFACTURING FRANCISCO ALEJO 1128 SHERBORN ST CORONA CA 92879-2089</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,591.22</p>

Debtor **New England Motor Freight, Inc.**

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3.1159. Nonpriority creditor's name and mailing address IMS TRADING LLC % WILLIAMS & ASSOCIATES 405 E 78TH ST BLOOMINGTON MN 55420-1251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$51,584.70
3.1160. Nonpriority creditor's name and mailing address IN THE SWIM TYE WILSON 320 INDUSTRIAL DR WEST CHICAGO IL 60185-1817 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$489.97
3.1161. Nonpriority creditor's name and mailing address INDEED INC MAIL CODE 5160 PO BOX 660367 DALLAS TX 75266-0367 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,000.00

Debtor **New England Motor Freight, Inc.**

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3.1162. Nonpriority creditor's name and mailing address INDEPENDENT ELECTRIC WHITNEY LINCOLN 41 INNER BELT RD SOMERVILLE MA 02143-4417 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$106.00
3.1163. Nonpriority creditor's name and mailing address INDIANA STATE CENTRAL COLLECTION UNIT (INSCCU) PO BOX 6219 INDIANAPOLIS IN 46206-6219 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$624.30
3.1164. Nonpriority creditor's name and mailing address INDIANAPOLIS POWER & LIGHT CO P O BOX 110 INDIANAPOLIS IN 46206-0110 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$698.81

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<p>3.1165. Nonpriority creditor's name and mailing address</p> <p>INDUSTRIAL FURNACE % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$266.59</p>
<p>3.1166. Nonpriority creditor's name and mailing address</p> <p>INDUSTRIAL HANDLING SYSTEMS PO BOX 0501 WEST SPRINGFIELD MA 01090</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,096.31</p>
<p>3.1167. Nonpriority creditor's name and mailing address</p> <p>INDUSTRIAL MOTORS INC 31 LINK ST PAWTUCKET RI 02861</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,085.00</p>

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3.1168. Nonpriority creditor's name and mailing address INDUSTRIAL PARTS CO. 163 BELMONT AVENUE GARFIELD, NJ 07026 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$458.49
3.1169. Nonpriority creditor's name and mailing address INDUSTRIAL RUBBER CO P O BOX 359 ELIZABETH NJ 07207-0359 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,789.00
3.1170. Nonpriority creditor's name and mailing address INFORM DECISIONS 30162 TOMAS SUITE 101 RANCHO SANTA MARGARITA CA 92688 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,920.00

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3.1171. Nonpriority creditor's name and mailing address INK IT DESIGN AVI PERLSTEIN 644 CROSS ST UNIT 19 LAKEWOOD NJ 08701-4654 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$107.00
3.1172. Nonpriority creditor's name and mailing address INLINE PLASTICS LEZLIE STORCH 42 CANAL ST SHELTON CT 06484-3223 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,356.86
3.1173. Nonpriority creditor's name and mailing address INNO PAK INC HEIDI GREEN 1932 PITTSBURGH DR DELAWARE OH 43015-3868 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$43.64

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3.1174. Nonpriority creditor's name and mailing address INNOVATIVE DISTRIBUTION SERV 2015 CONGRESS ST PORTLAND ME 04102 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,115.00
3.1175. Nonpriority creditor's name and mailing address INNOVATIVE LOGISTICS DEBORAH FOUGHT PO BOX 1446 ELYRIA OH 44035 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,180.44
3.1176. Nonpriority creditor's name and mailing address INNOVATIVE LOGISTICS DEBORAH FOUGHT PO BOX 1446 ELYRIA OH 44035 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$52.19

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3.1177. Nonpriority creditor's name and mailing address INNOVEX 11 POWDER HILL ROAD LINCOLN RI 02865	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$139.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1178. Nonpriority creditor's name and mailing address INSPIRED BEAUTY BRANDS FELIPE QUIROZ 330 SEVENTH AVE 16TH FL NEW YORK NY 10001-5010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1179. Nonpriority creditor's name and mailing address INSPIRED BEAUTY BRANDS % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$312.65
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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<p>3.1180. Nonpriority creditor's name and mailing address INSTANT EXPRESS 1277 MT READ BLVD ROCHESTER NY 14606</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$174.00</p>
<p>3.1181. Nonpriority creditor's name and mailing address INTEGRATED OFFICE SOLUTIONS 126 HALL STREET, STE. J CONCORD NH 03301-3447</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$264.00</p>
<p>3.1182. Nonpriority creditor's name and mailing address INTENSIVE SUPERVISION PROGRAM PROBATION SERVICES P O BOX 974 TRENTON NJ 08625</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$23.54</p>

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3.1183. Nonpriority creditor's name and mailing address INTER CITY TIRE 777 DOWD AVE ELIZABETH NJ 07201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$178.08
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1184. Nonpriority creditor's name and mailing address INTERDEL LOGISTICS ALBERT CHEN 167-14 146TH RD FLOOR 1 JAMAICA NY 11434-5251	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$381.30
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1185. Nonpriority creditor's name and mailing address INTERLINE BRANDS NIKKI VOLPONI 701 SAN MARCO BLVD JACKSONVILLE FL 32207-8175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$370.76
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1186. Nonpriority creditor's name and mailing address INTERLINE BRANDS ATTN : ANGELA WILLIAM 1100 N LOMBARS RD LOMBARD IL 60148-1252	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$458.84
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1187. Nonpriority creditor's name and mailing address INTERLINE BRANDS KECIA WOODS 701 SAN MARCO BLVD JACKSONVILLE FL 32207-8175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,636.28
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1188. Nonpriority creditor's name and mailing address INTERMODAL EQUIPMENT PARTS P.O. BOX 257 ELIZABETH NJ 07207-0257	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$6,941.99
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1189. Nonpriority creditor's name and mailing address INTERNATIONAL ALUMINUM CORP 767 MONTEREY PASS RD MONTEREY PARK CA 91454 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$168.57
3.1190. Nonpriority creditor's name and mailing address INTERSTATE BATTERY C/O RUAN TRANSPORTATION PO BOX 9319 DES MOINES IA 50306-9319 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$49.32
3.1191. Nonpriority creditor's name and mailing address INTERSTATE TOWING & RECOVERY 1120 SAINT JOHNS ROAD CAMP HILL PA 17011 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,555.11

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3.1192. Nonpriority creditor's name and mailing address INTERSTATE TOWING & TRANSPORT SPECIALIST, INC 1655 HIGHLAND ROAD TWINSBURG OH 44087 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,200.00
3.1193. Nonpriority creditor's name and mailing address INTERTAPE POLYMER GROUP RAJ GOSAL 9999 CAVENDISH BLVD STE 200 ST-LAURENT QC H4M2X55548 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,224.58
3.1194. Nonpriority creditor's name and mailing address INTERTAPE POLYMER GROUP % TRANSPALCE CARGO CLAIM PO BOX 518 LOWELL AR 72745-0518 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,838.41

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3.1195. Nonpriority creditor's name and mailing address INTERTAPE POLYMER GROUP % TRANSPACE CARGO CLAIMS PO BOX 518 LOWELL AR 72745-0518 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,831.16
3.1196. Nonpriority creditor's name and mailing address INTERTAPE POLYMER GROUP RAJ GOSAL 9999 CAVENDISH BLVD STE 200 ST-LAURENT QC H4M 2X5 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$105.60
3.1197. Nonpriority creditor's name and mailing address IPC (USA), INC P O BOX 3250 ELLICOT CITY MD 21042 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$242,855.04

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3.1198. Nonpriority creditor's name and mailing address IPSCO 215 STATE ROUTE 88 OFFICE 103 GOOD ST ROSCOE PA 15477	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,039.32
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1199. Nonpriority creditor's name and mailing address IRC INC ASO 00 WADHAMS POB 5837 SOMERSET NJ 08875	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1200. Nonpriority creditor's name and mailing address IRON HORSE BEVERAGE CLIFTON MORELLO 68 S SERVICE RD STE 100 MELVILLE NY 11747-2354	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$28.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1201. **Nonpriority creditor's name and mailing address**

IRON MOUNTAIN DATA CENTERS LLC
PO BOX 28078
NEW YORK NY 10087-8079

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,601.00

3.1202. **Nonpriority creditor's name and mailing address**

IRONSHORE SPECIALTY INSURANCE CO
75 FEDERAL ST
5TH FL
BOSTON MA 02110

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1203. **Nonpriority creditor's name and mailing address**

IRS-- RAIVS TEAM
STOP 6705 P6
KANSAS CITY MO 64999

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$50.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1204. Nonpriority creditor's name and mailing address</p> <p>IRVING OIL CORP ACCNT#0018518005604 PO BOX 11012 LEWISTON ME 04243-9463</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$4,028.17</p>
<p>3.1205. Nonpriority creditor's name and mailing address</p> <p>ISLAND PUMP & TANK CORP. 40 DOYLE COURT EAST NORTHPORT NY 11731</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$950.47</p>
<p>3.1206. Nonpriority creditor's name and mailing address</p> <p>ITSIMPLIFY PO BOX 32192 NEW YORK NY 10087-2192</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$31,661.50</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1207. Nonpriority creditor's name and mailing address</p> <p>ITT GOULDS PUMPS HOLLY GORALL 240 FALL ST SENECA FALLS NY 13148-1590</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$620.00</p>
<p>3.1208. Nonpriority creditor's name and mailing address</p> <p>ITW POLYMERS ADHESIVES GREG SHEPPARD 30 ENDICOTT ST DANVERS MA 01923-3712</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$684.36</p>
<p>3.1209. Nonpriority creditor's name and mailing address</p> <p>J AND E TIRE CENTER, INC 4835 S HARDING ST INDIANAPOLIS IN 46217</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$904.50</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1210. Nonpriority creditor's name and mailing address J B HUNT PO BOX 682 LOWELL AR 72745-0682 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$725.00
3.1211. Nonpriority creditor's name and mailing address J M H ASSOCIATES KARYN L HUMMER 5060 RITTER RD, STE C3 MECHANICSBURG PA 17055-6774 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,480.00
3.1212. Nonpriority creditor's name and mailing address J M LANDSCAPING JOSE MONDRAGON 113 N MICHIGAN AVE ADDISON IL 60101 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$975.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1213. Nonpriority creditor's name and mailing address J ROSS EXPRESS, INC 3160 E 79TH STREET CLEVELAND OH 44104 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$400.00
3.1214. Nonpriority creditor's name and mailing address J WHITE CARGO CLAIMS 524 W WESTFIELD AVE ROSELLE PARK NJ 07204-1822 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,000.00
3.1215. Nonpriority creditor's name and mailing address J. F. MARTIN INC 4170 RICHMOND ST PHILADELPHIA PA 19137-1900 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$265.07

Debtor **New England Motor Freight, Inc.**

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3.1216. Nonpriority creditor's name and mailing address J.J. KELLER & ASSOCIATES PO BOX 6609 CAROL STREAM IL 60197-6609 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,278.81
3.1217. Nonpriority creditor's name and mailing address JA ANDERSON REALTY LLC 61 CLINTON ST MALDEN MA 02148 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1218. Nonpriority creditor's name and mailing address JACKSON BOND ENTERPRISES JEAN-PIERRE LATOURETTE 39 IND PARK DR DOVER NH 03820-4332 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1219. Nonpriority creditor's name and mailing address JACKSON OIL & SOLVENTS INC 75 REMITTANCE DRIVE DEPT 6988 CHICAGO IL 60675-6988 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$21,837.97
3.1220. Nonpriority creditor's name and mailing address JACKSON WELDING SUPPLY CO 1421 WEST CARSON ST PITTSBURGH PA 15219 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$69.99
3.1221. Nonpriority creditor's name and mailing address JACLYN PULLUM FOR JOHEN LESTATE CLAVEY MCNEES WALLACE AND NURICK LLC GUY H BROOKS ESQ 100 PINE ST PO BOX 1166 HARRISBURG PA 17108-1166 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1222. Nonpriority creditor's name and mailing address JACQUELINE MOK ATTN JACQUELINE MOK 2452 W BELMONT AVE CHICAGO IL 60618-5925 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$378.50
3.1223. Nonpriority creditor's name and mailing address JAEHNET*SCOTT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1224. Nonpriority creditor's name and mailing address JAFRAY REALTY, INC 51 DELTA DRIVE PAWTUCKET RI 02861 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$150.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1225. **Nonpriority creditor's name and mailing address**

JALIL WALTERS AND RASHIDA CARTER
METTE EVANS AND WOODSIDE
THOMAS A ARCHER ESQ
3401 NORTH FRONT ST
PO BOX 5950
HARRISBURG PA 17110-0950

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1226. **Nonpriority creditor's name and mailing address**

JAMES RIVER EQUIP
JOHN DEERE DEALER
2055 S BOSTON RD
DANVILLE VA 24540-5527

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1227. **Nonpriority creditor's name and mailing address**

JAMES RIVER EQUIP
ROBERT BLAKE
11053 LEADBETTER RD
ASHLAND VA 23005-3408

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,625.33

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1228. Nonpriority creditor's name and mailing address JAMES RIVER EQUIP JOHN DEERE DEALER 2055 S BOSTPN RD DANVILLE VA 24540-5527 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$931.10
3.1229. Nonpriority creditor's name and mailing address JAMES RIVER PETROLEUM, INC DEPT 720067 P O BOX 1335 CHARLOTTE NC 28201-1335 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$177,202.09
3.1230. Nonpriority creditor's name and mailing address JAMIE MAGARIAN MIRICK O'CONNELL EDWARD C. BASSETT JR 1800 WEST PARK DRIVE SUITE 400 WESTBOROUGH MA 01581-3926 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1231. **Nonpriority creditor's name and mailing address**

JANICE A GOODALL
ANDERSON LAW FIRM PC
CHRISTOPHER P ANDERSON
82 CHELSEA HARBOR DR
NORWICH CT 06360

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1232. **Nonpriority creditor's name and mailing address**

JANI-KING OF RICHMOND
C&C FRANCHISING, INC
9701 A METROPOLITAN COURT
RICHMOND VA 23236

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$738.30

3.1233. **Nonpriority creditor's name and mailing address**

JANI-KING OF ROANOKE/LYNCHBURG
5068 S AMHERST HWY SUITE 102
MADISON HEIGHTS VA 24572

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$315.12

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1234. Nonpriority creditor's name and mailing address JANS FARMHOUSE CRIPS KARA CALABRESI 112 S WINOOKSI AVE BURLINGTON VT 05401-2541 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$187.45
3.1235. Nonpriority creditor's name and mailing address JANS LEASING CORP. I-71 NORTH AVENUE EAST ELIZABETH NJ 07201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,744,419.58
3.1236. Nonpriority creditor's name and mailing address JARDEN HOME BRANDS HEATHER WARD 9999 E 121ST ST FISHERS IN 46038 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$138.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1237. Nonpriority creditor's name and mailing address JARDEN HOME BRANDS VICTORIA MIANESE 9999 E 121ST ST FISHERS IN 46038-0657 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$995.72
3.1238. Nonpriority creditor's name and mailing address JARRETT LOGISTICS JESSICA CARR 1347 N MAIN ST ORRVILLE OH 44667-9761 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,978.90
3.1239. Nonpriority creditor's name and mailing address JARRETT LOGISTICS LORA RUFENER 1347 N MAIN ST ORRVILLE OH 44667-9761 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,001.69

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1240. **Nonpriority creditor's name and mailing address**

JAS FORWARDING
BRANDON CROSBY
3101 YORKMONT RD
CHARLOTTE NC 28208-7373

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1241. **Nonpriority creditor's name and mailing address**

JAY B SPIRT PA
3205 B CORPORATE COURT
ELLCOTT CITY MD 21042

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$176.14

3.1242. **Nonpriority creditor's name and mailing address**

JAY MARTIN
ATTORNEY FOR THE PLAINTIFF
1704 LOCUST ST 3RD FL
PHILADELPHIA PA 19103

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1243. Nonpriority creditor's name and mailing address JC SUPPLY JORGE CAMGIO 245 E ROOSEVELT AVE HATO REY PR 00917 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$669.00
3.1244. Nonpriority creditor's name and mailing address JD EQUIPMENT INC 1662 US HIGHWAY 62 SW WASHINGTON COURT HOUSE OH 43160 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$105.14
3.1245. Nonpriority creditor's name and mailing address JDEE.NET JENNY DOMINGUEZ 215 RUSSELL AVE RAHWAY NJ 07065-1521 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$599.99

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1246. Nonpriority creditor's name and mailing address JEDWARDS INTERNATIONAL INC BROOKE FERGUSON 141 CAMPANELLI DR BRAINTREE MA 02184-5206 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,813.39
3.1247. Nonpriority creditor's name and mailing address JEEN INTERNATIONAL CORPORATION TERESA MESSINA 24 MADISON RD FAIRFIELD NJ 07004-2309 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,298.71
3.1248. Nonpriority creditor's name and mailing address JEEN INTERNATIONAL CORPORATION RICK LUDLOW 24 MADISON RD FAIRFIELD NJ 07004-2309 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,677.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1249. Nonpriority creditor's name and mailing address JELD WEN WINDOWS & DOORS DONNA GERA 1162 KEYSTONE BLVD POTTSVILLE PA 17901-9055 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,596.92
3.1250. Nonpriority creditor's name and mailing address JENEL GROUP VITO CHIARAMONTE 303 MERRICK ROAD SUITE 400 LYNBROOK NY 11563-2501 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,567.01
3.1251. Nonpriority creditor's name and mailing address JENKINS*ALBERT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1252. **Nonpriority creditor's name and mailing address**

JENNY MUNSON ANDRESS ADMINISTRATRIX OF
THE ESTATE OF HERBERT ANDRESS
TIMOTHY F RAYNE ESQ TIFFANY M SHRENK
ESQ
ATTY FOR THE CLAIMANT MACELREE HARVEY
LTD
211 EAST STATE ST
KENNETT SQUARE PA 19348

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1253. **Nonpriority creditor's name and mailing address**

JENNY MUNSON ANDRESS ETC V
NEW ENGLAND MOTOR FREIGHT INC
KEVIN CANAVAN ESQ
ATTORNEY FOR THE DEFENDENTS SWARTZ
CAMPBELL
TWO LIBERTY PL 50 SOUTH 16TH ST
PNILADELPHIA PA 19102

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1254. **Nonpriority creditor's name and mailing address**

JERICH USA
1 INDUSTRIAL RD
SUITE 102
DAYTON NJ 08810-3501

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$845.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1255. Nonpriority creditor's name and mailing address JERSEY CITY MUNICIPAL COURT 365 SUMMIT AVENUE JERSEY CITY NJ 073061 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10.00
3.1256. Nonpriority creditor's name and mailing address JESCO INC. JOHN DEERE DEALER 8411 PULASKI HWY BALTIMORE MD 21237 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,619.36
3.1257. Nonpriority creditor's name and mailing address JET ELECTRIC MOTOR CO 688 SCHOOL ST PAWTUCKET RI 02860 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1258. Nonpriority creditor's name and mailing address JFV TRUCKING 37 MAPLE AVE DOVER NJ 07801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,100.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1259. Nonpriority creditor's name and mailing address JH PAPER COMPANY INC PO BOX 2112 LIVINGSTON NJ 07039-7712	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,800.46
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1260. Nonpriority creditor's name and mailing address JHJ INTERNATIONAL LTD JOSEPH YU JFK INTL AIRPORT BLDG 9 STE 278A JAMAICA NY 11430	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$5,000.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1261. **Nonpriority creditor's name and mailing address**

JM SMUCKERS CO
6670 LOW
BLOOMSBURG PA 17815

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1262. **Nonpriority creditor's name and mailing address**

JOANNE C KNIGHT
PO BOX 106172
ATLANTA GA 30348

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1263. **Nonpriority creditor's name and mailing address**

JOHN ADAMS BARES JANE MARIE MARRON ET
AL
COOPER SEVILLANO LLC
JEFFREY COOPER ESQ
1087 BROAD ST
4TH FLOOR
BRIDGEPORT CT 06604

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1264. Nonpriority creditor's name and mailing address JOHN BETLEM INC. 898 CLINTON AVENUE SOUTH ROCHESTER NY 14620 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$322.63
3.1265. Nonpriority creditor's name and mailing address JOHN DEERE CLAIMS KAMI GONZALEZ 300 DATA CT DUBUQUE IA 52003-8963 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,365.91
3.1266. Nonpriority creditor's name and mailing address JOHN DEERE CLAIMS JOSIE SMITH 300 DATA CT DUBUQUE IA 52003-8963 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,556.22

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1267. Nonpriority creditor's name and mailing address JOHN DEERE CLAIMS MEGAN DEUTMEYER 300 DATA CT DUBUQUE IA 52003-8963 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,262.72
3.1268. Nonpriority creditor's name and mailing address JOHN HANCOCK LIFE INSURANCE CO PO BOX 7247-0274 PHILADELPHIA PA 19170-0274 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$33,476.61
3.1269. Nonpriority creditor's name and mailing address JOHN W KENNEDY COMPANY INC. 990 WATERMAN AVE PO BOX 14217 EAST PROVIDENCE RI 02914 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,894.20

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1270. **Nonpriority creditor's name and mailing address**

JOHN W. JAMES
PERKINS AND ASSOCIATES
ATTORNEY FOR PLAINTIFF
30 LUCY ST
WOODBIDGE CT 06525

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1271. **Nonpriority creditor's name and mailing address**

JOHN W. JAMES V. PAUL E. SMITH AND NEMF
SOLIMENE & SECONDO, LLP, ELYCIA D.
SOLIMENE
ATTORNEY FOR THE DEFENDANT
1501 EAST MAIN STREET
SUITE 204
MERIDEN CT 06450

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1272. **Nonpriority creditor's name and mailing address**

JOHN ZAHNER
115 DEERWOOD LN
GRAND ISLAND NY 14072

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1273. Nonpriority creditor's name and mailing address JOHN'S MOBILE REPAIR SERVICE 1511 COMMERCE AVENUE CARLISLE PA 17015 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$111.30
3.1274. Nonpriority creditor's name and mailing address JOHN'S TOWING HEAVY & LIGHT 1121 SHERIDAN DRIVE TONAWANDA NY 14150 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,851.69
3.1275. Nonpriority creditor's name and mailing address JOHN'S WRECKER SERVICES PO BOX 293 CONCORD NH 03302 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,684.38

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1276. Nonpriority creditor's name and mailing address JOHNSON & JORDAN INC 18 MUSSEY ROAD SCARBOROUGH ME 04074 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,461.25
3.1277. Nonpriority creditor's name and mailing address JOHNSON & TOWERS INC 500 WILSON POINT ROAD BALTIMORE MD 21220 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$393.09
3.1278. Nonpriority creditor's name and mailing address JOHNSON COMPANY 625 CONKLIN ROAD BINGHAMTON NY 13903-2700 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$968.73

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1279. **Nonpriority creditor's name and mailing address**

JOHNSON CONTROLS SECURITY SOL
P O BOX 371967
PITTSBURG PA 15250-7967

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$127.84

3.1280. **Nonpriority creditor's name and mailing address**

JOHNSON'S TIRE SERVICE, INC
10426 ROUTE 6
CLARENDON PA 251640553

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$284.30

3.1281. **Nonpriority creditor's name and mailing address**

JOHNSTOWN AUTO PARTS
JEFF LEHNER
208 N PERRY ST
JOHNSTOWN NY 12095

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1282. **Nonpriority creditor's name and mailing address**

JOLENE GOODELL
3 AIKEN AVE
RENSSELAER NY 12144

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1283. **Nonpriority creditor's name and mailing address**

JON OLIVER MATTHEWS ET AL V
NEW ENGLAND MOTOR FREIGHT INC ET AL
ANGELO FRESILLI
45 MISTY CT
SOUTH KINGSTOWN RI 02879

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1284. **Nonpriority creditor's name and mailing address**

JONAITIS PLOWING
4 BURNHAM ST
SOUTH PORTLAND ME 04106

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,100.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1285. Nonpriority creditor's name and mailing address</p> <p>JONATHAN EMORD 11808 WOLF RUN LANE CLIFTON VA 20124-2250</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$9,320.00</p>
<p>3.1286. Nonpriority creditor's name and mailing address</p> <p>JONES PERFORMANCE PRODUCTS INC P O BOX 808 1 JONES WAY WEST MIDDLESEX PA 16159</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,772.00</p>
<p>3.1287. Nonpriority creditor's name and mailing address</p> <p>JONES*STUART Address Intentionally Omitted</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>PENDING WORKERS' COMPENSATION CLAIM</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1288. **Nonpriority creditor's name and mailing address**

JOSE L FERRER
WEISS AND ROSENBLUM PC
BARRY WEISS ESQ
27 UNION SQUARE WEST
STE 307
NEW YORK NY 10003

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1289. **Nonpriority creditor's name and mailing address**

JOSEPH CARNEY
FINKELSTEIN AND PARTNERS LLP
DAVID E GROSS ESQ
1279 ROUTE 300
PO BOX 1111
NEWBURGH NY 12551

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

DISMISSED LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1290. **Nonpriority creditor's name and mailing address**

JOSEPH PISANO
ATTN: MR PISANO
411 ORCHARD DR
WALLKILL NY 12589-4105

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,850.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1291. **Nonpriority creditor's name and mailing address**

JOSEPH VARSIK JR
FINKELSTEIN AND PARTNERS LLP
DAVID E GROSS ESQ
1279 ROUTE 300
PO BOX 1111
NEWBURGH NY 12551

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1292. **Nonpriority creditor's name and mailing address**

JOSEPH VARSIK, JR.
C/O FINKELSTEIN & PARTNERS, LLP
JAMES SHUTTLEWORTH
1279 ROUTE 300
NEWBURGH NY 12551

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1293. **Nonpriority creditor's name and mailing address**

JOY GOBAL
2101 W PIKE ST
HOUSTON PA 15342

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1294. **Nonpriority creditor's name and mailing address**

JOYCE NG
PO BOX 9111
MACON GA 31208

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1295. **Nonpriority creditor's name and mailing address**

JX ENTERPRISES INC
1320 WALNUT RIDGE DRIVE
SUITE 100
HARTLAND WI 53029

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,306.89

3.1296. **Nonpriority creditor's name and mailing address**

K LINE LOGISTICS USA
ANNU KOMAGUCHI
145-68 228TH ST UNIT 2
SPRINGFIELD GARDENS NY 11413-3934

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$250.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1297. Nonpriority creditor's name and mailing address K P M EXCEPTIONAL LLC SHARON BELLIS X 160 ONE EXCEPTIONAL WAY LANDING NJ 07850-1540 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,343.64
3.1298. Nonpriority creditor's name and mailing address KAITLAN PANTIN WINGATE RUSSOTTI SHAPIRO AND HALPERIN LLP JOSEPH STODUTO ESQ 420 LEXINGTON AVE STE 2710 NEW YORK NY 10170 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1299. Nonpriority creditor's name and mailing address KAL PAC INC KARA BOYLE 10 FACTORY ST MONTGOMERY NY 12549-1202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1300. Nonpriority creditor's name and mailing address KAL PAC INC MELISSA BAYNES 10 FACTORY ST MONTGOMERY NY 12549-1202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,258.76
3.1301. Nonpriority creditor's name and mailing address KALMIA DIST CARR # 181 KM. 8.0 DOS BOCAS STREET TRUJILLO ALTO PR 00976 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,447.69
3.1302. Nonpriority creditor's name and mailing address KANE*CRAIG Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1303. Nonpriority creditor's name and mailing address KAO USA INC CLAIMS DEPT 2535 SPRING GROVE AVE CINCINNATI OH 45214-1729 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,803.28
3.1304. Nonpriority creditor's name and mailing address KAREEM A MILLS BLOCK O'TOOLE AND MURPHY LLP MICHAEL J HURWITZ ESQ ONE PENN PLAZA # 5315 NEW YORK NY 10119 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1305. Nonpriority creditor's name and mailing address KARNAK CORPORATION MICHAEL BREHM 330 CENTRAL AVE CLARK NJ 07066-1108 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,827.20

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1306. **Nonpriority creditor's name and mailing address**

KATHLEEN EVANS
ATTORNEY FOR PLAINTIFF ANTHONY G ROSS
ESQUIRE
126 SOUTH MAIN ST
PITTSTON PA 18640

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1307. **Nonpriority creditor's name and mailing address**

KATHLEEN EVANS V
NEW ENGLAND MOTOR FREIGHT INC ET AL
WAYNE STEIGERWALT
1110 HEMLOCK DR
LEHIGHTON PA 18235

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1308. **Nonpriority creditor's name and mailing address**

KATIE MAC DOUGALL V
NEW ENGLAND MOTOR FREIGHT INC ET AL
BRIAN CYR
222 REIDEL RD
AMSTERDAM NY 12010

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1309. Nonpriority creditor's name and mailing address KDL PO BOX 752 CARNEGIE PA 15106-0752 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,460.75
3.1310. Nonpriority creditor's name and mailing address KDL FREIGHT MANAGEMENT MICHELE PATTISON PO BOX 752 CARNEGIE PA 15106-0752 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$260.00
3.1311. Nonpriority creditor's name and mailing address KDL FREIGHT MANAGEMENT ASHLEY MC INTYRE 111 RYAN CT PITTSBURGH PA 15205-1310 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$480.23

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1312. Nonpriority creditor's name and mailing address KDM PRODUCTS CARIN ZINKE 820 COMMERCE PARKWAY CARPENTERSVILLE IL 60110-1721 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,078.94
3.1313. Nonpriority creditor's name and mailing address KEHE DISTRIBUTORS 860 NESTLE WAY , SUITE 250 BREINIGSVILLE PA 18031 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,365.43
3.1314. Nonpriority creditor's name and mailing address KELLER WEBER TRUCKING, INC 20 VILLAGE SQUARE DRIVE MARIETTA PA 17547 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,215.76

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1315. **Nonpriority creditor's name and mailing address**

KELLIE MARCIANO
164 COUNTRY MANOR WAY
APT 19
WEBSTER NY 14580

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1316. **Nonpriority creditor's name and mailing address**

KELLOGG COMPANY
% TRANSPLACE CARGO CLAIMS
PO BOX 518
LOWELL AR 72745-0518

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$13,191.42

3.1317. **Nonpriority creditor's name and mailing address**

KELSEN INC
DOLORES MC GRATH
PO BOX 844238
BOSTON MA 02284-4238

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$858.60

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1318. **Nonpriority creditor's name and mailing address**

KELSIE WALKER
ATTORNEY FOR THE PLAINTIFF
THOMAS E BADWAY AND ASSOC LLC
POBOX 6426
PROVIDENCE RI 02940

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1319. **Nonpriority creditor's name and mailing address**

KELSIE WALKER NEW ENGLAND MOTOR
FREIGHT INC
JUAN RODRIGUIZ ALMONTE
5 TRUES PKWY
SANDOWN NH 03873

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1320. **Nonpriority creditor's name and mailing address**

KEN TEITLBAUM
3 NIKIA DR
ISLIP NY 11751

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1321. Nonpriority creditor's name and mailing address KENCove FARM FENCE LEANNA GALEY 11409 E 218TH ST PECULIAR MO 64078-2524	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,755.79
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1322. Nonpriority creditor's name and mailing address KENNEALLY*JOHN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1323. Nonpriority creditor's name and mailing address KENNEALLY*JOHN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1324. **Nonpriority creditor's name and mailing address**

KENNETH FERSCH
BRIGNOLE, BUSH & LEWIS
TIMOTHY BRIGNOLE
73 WADSWORTH STREET
HARTFORD CT 06106-1768

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1325. **Nonpriority creditor's name and mailing address**

KENNETH FERSCH V. RICKY COMMO & NEW
ENGLAND MOTOR FREIGHT, INC.
SOLIMENE & SECONDO, LLP, ELYCIA D.
SOLIMENE
ATTORNEY FOR THE DEFENDANT
1501 EAST MAIN STREET
SUITE 204
MERIDEN CT 06450

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1326. **Nonpriority creditor's name and mailing address**

KENNETH WEGNER
9 BRIDLEPATH LN
LANCASTER NY 14086

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$245.77

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1327. Nonpriority creditor's name and mailing address KENNY MFG COMPANY ANDREINA CASTRO 1000 JEFFERSON BLVD WARWICK RI 02886-2201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,700.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1328. Nonpriority creditor's name and mailing address KEOLIS INC DOMINIC RIZZITANO 70 REAR THIRD AVE SOMERVILLE MA 02143	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$9,450.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1329. Nonpriority creditor's name and mailing address KEOUGH INSTALLATION STEVE KEOUGH SA BRYANT ST WOBURN MA 01801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1330. Nonpriority creditor's name and mailing address KEYSTONE OIL PRODUCTS CORP 1600 HUMMEL AVE PO BOX 157 CAMP HILL PA 17011 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$353.85
3.1331. Nonpriority creditor's name and mailing address KEYSTONE TECHNOLOGIES DONNA MICHAEL 1390 WELSH RD NORTH WALES PA 19454-1900 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,147.50
3.1332. Nonpriority creditor's name and mailing address KEYSTONE TRAILER SERVICES, INC 100 W CRONE ROAD STE A YORK PA 17406 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,253.50

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1333. Nonpriority creditor's name and mailing address KIDDE FENWAL INC SUZANNE CARDENAS 400 MAIN ST ASHLAND MA 01721-2150 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,648.00
3.1334. Nonpriority creditor's name and mailing address KIDIWAY INC HATEM BESBES 2205 BOUL IND LAVAL QC H7S1P8 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,600.00
3.1335. Nonpriority creditor's name and mailing address KINETIC SUPPLY CHAIN SERV,LLC 5 VILLAGE COURT HAZLET NJ 07730-1530 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$356.70

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1336. Nonpriority creditor's name and mailing address KING ARTHUR FLOUR MEAGAN KIDDER 62 ACCORD PARK DR NORWELL MA 02061-1645 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$462.60
3.1337. Nonpriority creditor's name and mailing address KING WIRE ARNULFO MUNOZ 2305 DAVIS ST NORTH CHICAGO IL 60086-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1338. Nonpriority creditor's name and mailing address KINGDOM GLOBAL % CTS 1915 VAUGHN ROAD KENNESAW GA 30144-4502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,000.55

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1339. Nonpriority creditor's name and mailing address</p> <p>KINGSGATE TRANSPORTATION SERVICES DAVID BECKHAM 9100 W CHESTER TOWNE CENTRE STE 300 WEST CHESTER OH 45069-3106</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$10,093.36</p>
<p>3.1340. Nonpriority creditor's name and mailing address</p> <p>KINT BEVERAGE CONCEPTS FIRE PROTECTION PO BOX 60490 HARRISBURG PA 17106-0490</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,059.99</p>
<p>3.1341. Nonpriority creditor's name and mailing address</p> <p>KIRCHGESSNER*ROBBIE Address Intentionally Omitted</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>PENDING WORKERS' COMPENSATION CLAIM</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1342. Nonpriority creditor's name and mailing address KIRK NATIONALEASE CO. PO BOX 4369 SIDNEY OH 45365	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$57,679.92
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1343. Nonpriority creditor's name and mailing address KISS LOGISTICS, INC 2504 APPLEBY DRIVE OCEAN NJ 07712	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$366.02
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1344. Nonpriority creditor's name and mailing address KISS PRODUCTS INC ALEXANDRE CHAN 25 HARBOR PARK DR PORT WASHINGTON NY 11050-4605	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$2,540.88
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.1345. Nonpriority creditor's name and mailing address KISS PRODUCTS INC ALEXANDRE CHAN 57 SEAVIEW BLVD PORT WASHINGTON NY 11050-4660 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,493.92
3.1346. Nonpriority creditor's name and mailing address KLEINSCHMIDT INC PO BOX 7158 DEERFIELD IL 60015-7158 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,799.60
3.1347. Nonpriority creditor's name and mailing address KNADLER*ANDREW Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.1348. Nonpriority creditor's name and mailing address KOCH FILTER CORP TRACI VANCE BOBBY 8401 AIR COMMERCE DR LOUISVILLE KY 40219-3503	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$153.84
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1349. Nonpriority creditor's name and mailing address KOENIG EQUIPMENT JOHN DEERE DEALER 16240 COUNTY RD 25A ANNA OH 45302-9723	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$212.86
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1350. Nonpriority creditor's name and mailing address KOKE INC THOMAS MIKSCH 582 QUEENSBURY AVE QUEENSBURY NY 12804-7612	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$272.68
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.1351. Nonpriority creditor's name and mailing address KOLMAR LAB BETTY DONNELLY PO BOX 1111 PORT JERVIS NY 12771-0154 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,935.94
3.1352. Nonpriority creditor's name and mailing address KONICA MINOLTA BUS. SOLUTIONS DEPT.2366 PO BOX 122366 DALLAS TX 75312-2366 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$74.25
3.1353. Nonpriority creditor's name and mailing address KOOLTRONTIC INC 30 PENNINGTON HOPEWELL RD PENNINGTON NJ 08534 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1354. **Nonpriority creditor's name and mailing address**

KORE INSURANCE HOLDINGS LLC
354 EISENHOWER PKWY
PLAZA 1
LIVINGSTON NJ 07039

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1355. **Nonpriority creditor's name and mailing address**

KOVATCH MOBILE EQUIPMENT
BRITTANY BOWMAN
ONE INDUSTRIAL COMPLEX
NESQUEHONING PA 18240-2201

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$5,499.00

3.1356. **Nonpriority creditor's name and mailing address**

KROLL*ADAM
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1357. Nonpriority creditor's name and mailing address KRW CYCLES JOSEPH MIRACLE 8500 N MAIN ST DAYTON OH 45415-1325</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: CARGO CLAIMS</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$836.81</p>
<p>3.1358. Nonpriority creditor's name and mailing address KURTZ BROTHERS JEREMIAH MILES PO BOX 392 CLEARFIELD PA 16830-0392</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$337.75</p>
<p>3.1359. Nonpriority creditor's name and mailing address KURTZ BROTHERS CHRIS BARR 400 REED ST CLEARFIELD PA 16830-2540</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$490.55</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1360. Nonpriority creditor's name and mailing address KUTOL PRODUCTS BOB MARTIN 100 PARTNERSHIP WAY CINCINNATI OH 45241-1571	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$588.94
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1361. Nonpriority creditor's name and mailing address KYE JA PARK & SAM NAM JUNG V. JOSEPH GRANDEY & NEMF ANDREW PARK, P.C. ANDREW PARK, ESQ. 450 SEVENTH AVENUE SUITE 1805 NEW YORK NY 10123	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1362. Nonpriority creditor's name and mailing address L AND L AUTO SUPPLY 3008 RT 39 W ARCADE NY 14009	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1363. **Nonpriority creditor's name and mailing address**

LAB TECH SALES
% ECHO GLOBAL
600 W CHICAGO AVE STE 725
CHICAGO IL 60654-2801

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1364. **Nonpriority creditor's name and mailing address**

LADDAWN INC
JUDY CORREA
155 JACKSON RD
DEVENS MA 01434-5614

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$131.22

3.1365. **Nonpriority creditor's name and mailing address**

LAMSON*AARON
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1366. Nonpriority creditor's name and mailing address LAN CO COMPANIES INC 7330 EASTMAN ROAD NORTH SYRACUSE NY 13212 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,242.00
3.1367. Nonpriority creditor's name and mailing address LANDER ENTERPRISES, LLC 7565 ROUTE 30 IRWIN PA 15642-7519 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,944.64
3.1368. Nonpriority creditor's name and mailing address LANDING AT SACO BAY LINDSEY KRUEGER 392 MAIN ST SACO ME 04072-1521 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,760.15

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1369. Nonpriority creditor's name and mailing address LANDRY AND MARTIN CORP INC 362 CENTRAL AVENUE PAWTUCKET RI 02860 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,191.50
3.1370. Nonpriority creditor's name and mailing address LANDSTAR GLOBAL LOGISTICS, INC P O BOX 784302 PHILADELPHIA PA 19178-4302 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$260,353.16
3.1371. Nonpriority creditor's name and mailing address LANDSTAR LOGISTICS KHARIS ROJAS 13410 SUTTON PARK DR S JACKSONVILLE FL 32224-5270 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,680.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1372. Nonpriority creditor's name and mailing address LANDSTAR LOGISTICS SHELBY GODARD 13410 SUTTON PARK DR S JACKSONVILLE FL 32224-5270 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,192.11
3.1373. Nonpriority creditor's name and mailing address LANGHAM LOGISTICS DEANNE JACKSON 5335 W 74TH ST INDIANAPOLIS IN 46268-4180 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1374. Nonpriority creditor's name and mailing address LANGHAM LOGISTICS DEANNE JACKSON 5335 W 74TH ST INDIANAPOLIS IN 46268-4180 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$211.68

Debtor **New England Motor Freight, Inc.**

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3.1375. **Nonpriority creditor's name and mailing address**

LANGTON*PETER
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1376. **Nonpriority creditor's name and mailing address**

LAPP U S A
29 HANOVER ROAD
FLORHAM PARK NJ 07932-1408

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$108.54

3.1377. **Nonpriority creditor's name and mailing address**

LARRABEE'S TIRE SERV, LLC
17 HUNT CREEK ROAD
NICHOLS NY 13812

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$292.41

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1378. **Nonpriority creditor's name and mailing address**

LARSEN*DEREK
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1379. **Nonpriority creditor's name and mailing address**

LASANTA*JUAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1380. **Nonpriority creditor's name and mailing address**

LASKY*THOMAS
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1381. **Nonpriority creditor's name and mailing address**

LASKY*THOMAS
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1382. **Nonpriority creditor's name and mailing address**

LATEXCO LLC
SEZQUIN DEMIRKILIC
975 GERRARD ROAD
LAVONIA GA 30553-2952

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$6,966.00

3.1383. **Nonpriority creditor's name and mailing address**

LATHAM POOL PRODUCTS
C/O BACKHAUL DIRECT
1 VIRGINIA AVE STE 400
INDIANAPOLIS IN 46204-3644

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$417.40

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1384. **Nonpriority creditor's name and mailing address**

LAUNDRYLUX
461 DOUGHTY BLVD
INWOOD NY 11096

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$44.66

3.1385. **Nonpriority creditor's name and mailing address**

LAW OFFICES OF WEAVER AND FITZPATRICK
131WEST PATRICK ST
FREDERICK MD 21701

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1386. **Nonpriority creditor's name and mailing address**

LAWRENCE W BANKS
GRANT AND GRANT ATTORNEYS
T BLAKE ORNER
9247 N MERIDIAN ST STE 310
INDIANAPOLIS IN 46260

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1387. **Nonpriority creditor's name and mailing address**

LAWRENCE*THOMAS
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1388. **Nonpriority creditor's name and mailing address**

LB SMITH FORD
12TH & MARKET STREETS
PO BOX 138
LEMOYNE PA 17043

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$204.72

3.1389. **Nonpriority creditor's name and mailing address**

LEAL*TIAGO
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1390. Nonpriority creditor's name and mailing address LEAVITT CORP JANINE LE FAVE 100 SANTILLI HWY EVERETT MA 02149-1938 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,842.00
3.1391. Nonpriority creditor's name and mailing address LEBEL*ROBERT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1392. Nonpriority creditor's name and mailing address LEE HI TOWING & RECOVERY P O BOX 12101 ROANOKE VA 24022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,050.00

Debtor **New England Motor Freight, Inc.**

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3.1393. Nonpriority creditor's name and mailing address LEE SUPPLY 1ST & LINCOLN AVE CHARLEROI PA 15022-2423	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$206.04
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.1394. Nonpriority creditor's name and mailing address LEE*GARY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1395. Nonpriority creditor's name and mailing address LEMAN U S A INC DANIEL RESMUSSEN 67 WALNUT AVENUE, SUITE 301 CLARK NJ 07066-1640	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$32,986.30
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.1396. Nonpriority creditor's name and mailing address LEMAN USA 820 THORNDALE AVE BENSENVILLE IL 60106-1138 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$155.82
3.1397. Nonpriority creditor's name and mailing address LEON I HIGBEE UM CLAIM JOHN J FROMEN 4367 HARLEM RD SYNDER NY 14226 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1398. Nonpriority creditor's name and mailing address LEON SINGH 107-39 122ND ST QUEENS NY 11419-2817 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.1399. Nonpriority creditor's name and mailing address LEPCO CHRIS REINHOLD 1475 RIVER RD MARIETTA PA 17547-9401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,779.01
3.1400. Nonpriority creditor's name and mailing address LEWIS GALE MEDICAL CENTER 1900 ELECTRIC ROAD SALEM VA 24153 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,782.00
3.1401. Nonpriority creditor's name and mailing address LEXIS NEXIS P O BOX 9584 NEW YORK NY 10087-4584 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$566.28

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3.1402. **Nonpriority creditor's name and mailing address**

LIBERTY AUTOGLASS LLC
509 NORTH 1ST STREET
LEHIGHTON PA 18235

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$419.78

3.1403. **Nonpriority creditor's name and mailing address**

LIBERTY GLASS TECHS, INC
1550 W FULLERTON AVE
UNIT D
ADDISON IL 60101

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$430.00

3.1404. **Nonpriority creditor's name and mailing address**

LIBERTY INSURANCE UNDERWRITERS INC
55 WATER ST
23RD FL
NEW YORK NY 10041

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1405. **Nonpriority creditor's name and mailing address**

LIBERTY INTL TRUCKS OF NH, LLC
1400 SOUTH WILLOW STREET
MANCHESTER NH 03103

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$379.36

3.1406. **Nonpriority creditor's name and mailing address**

LIBERTY MUTUAL
ARNOLD E REDA
PO BOX 515097
LOS ANGELES CA 90051

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1407. **Nonpriority creditor's name and mailing address**

LIBERTY MUTUAL FIRE INSURANCE
CARMAN CALLAHAN AND INGHAM LLP
JAMI C AMARASINGHE ESQ
266 MAIN ST
FARMINGDALE NY 11735

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

SETTLEMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$10,000.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1408. **Nonpriority creditor's name and mailing address**

LIBERTY MUTUAL INSURANCE
CHRISTINE MCCARTHY
Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

WORKERS' COMPENSATION PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$501,543.00

3.1409. **Nonpriority creditor's name and mailing address**

LIBERTY MUTUAL INSURANCE CO
PO BOX 2027
3-508113-0000
KEENE NH 03431-7027

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$19,145.22

3.1410. **Nonpriority creditor's name and mailing address**

LIBERTY MUTUAL MEGAN PAYNE SUBRO DEPT
PO BOX 515097
LOS ANGELES CA 90051

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1411. Nonpriority creditor's name and mailing address</p> <p>LIBERTY UTILITIES NH 75 REMITTANCE DRIVE,SUITE 1032 CHICAGO IL 60675-1032</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$4,747.18</p>
<p>3.1412. Nonpriority creditor's name and mailing address</p> <p>LIBERTY WATER COMPANY PO BOX 371852 PITTSBURGH PA 15250-7852</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$6,597.83</p>
<p>3.1413. Nonpriority creditor's name and mailing address</p> <p>LIECHTY FARM EQUIP JOHN DEERE DEALER 1701 S DEFIANCE ST ARCHBOLD OH 43502-9798</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

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3.1414. Nonpriority creditor's name and mailing address LIECHTY FARM EQUIP JOHN DEERE DEALER 20 INTERSTATE DR NAPOLEON OH 43545-9713 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$41.34
3.1415. Nonpriority creditor's name and mailing address LIF INDUSTRIES INC JOHN NARDONE 5 HARBOR PARK DR PORT WASHINGTON NY 11050-4698 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$945.25
3.1416. Nonpriority creditor's name and mailing address LIFEFACTORY % ECHO GLOBAL 600 W CHICAGO AVE, STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00

Debtor **New England Motor Freight, Inc.**

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3.1417. Nonpriority creditor's name and mailing address LIFETIME BRANDS SALLY JELONEK 12 APPLGATE DRIVE ROBBINSVILLE NJ 08691-2342 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,280.00
3.1418. Nonpriority creditor's name and mailing address LIFTECH EQUIPMENT COMPANIES 6847 ELLICOTT DRIVE EAST SYRACUSE NY 13057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,120.07
3.1419. Nonpriority creditor's name and mailing address LINCOLN WASTE SOLUTIONS, LLC 2075 SILAS DEANE HIGHWAY SUITE 101 ROCKY HILL CT 06067 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$70,965.62

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3.1420. **Nonpriority creditor's name and mailing address**

LINDA JAMES / STATE FARM
STATE FARM
PO BOX 106170
ATLANTA GA 30348

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1421. **Nonpriority creditor's name and mailing address**

LINDA JAMES ET AL V
NEW ENGLAND MOTOR FREIGHT INC ET AL
JASON WISHAM
204 MATTITUCK CT
MELVILLE NY 11747

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1422. **Nonpriority creditor's name and mailing address**

LINE OF CREDIT NOW
P O BOX 959
WOOD DALE IL 60191

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$90.00

Debtor **New England Motor Freight, Inc.**

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3.1423. Nonpriority creditor's name and mailing address LINK PRODUCT SOLUTIONS CLAIMS DEPT 333 N RIVERMEDE RD UNIT 5 CONCORD ON L4K3N7 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,481.46
3.1424. Nonpriority creditor's name and mailing address LINZER PRODUCTS JAMIE KOSKINAS 1325 HARVARD DR KANKAKEE IL 60901-9473 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,924.60
3.1425. Nonpriority creditor's name and mailing address LISI'S TOWING SERVICE INC ROUTE 6 BREWSTER NY 10509 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$812.89

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3.1426. Nonpriority creditor's name and mailing address LIVING DOORS INC JON PAUL PLANTE 22A SCOUNTING BLVD UNIT 3 MEDFORD NY 11763 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$960.00
3.1427. Nonpriority creditor's name and mailing address LIVIU GROSULEAC ELKTON T-43 155 GATESHEAD WAY PHOENIXVILLE PA 19460 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$305.70
3.1428. Nonpriority creditor's name and mailing address LLOYD'S SYNDICATES LOCKTON COMPANIES LLP CARGO AND LOGISTICS THE ST BOTOLPH BLDG 138 HOUNDSDITCH LONDON EC3A 7AG UNITED KINGDOM Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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<p>3.1429. Nonpriority creditor's name and mailing address</p> <p>LMS INTELLIBOUND LLC 3086 MOMENTUM PLACE CHICAGO IL 60689-5330</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,922.98</p>
<p>3.1430. Nonpriority creditor's name and mailing address</p> <p>LNK INTERNATIONAL AMANDA LOWTH 60 ARKAY DR HAUPPAUGE NY 11788-3708</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>
<p>3.1431. Nonpriority creditor's name and mailing address</p> <p>LOCKTON COMPANIES TIM HARPER 1185 AVENUE OF THE AMERICAS NEW YORK NY 10036</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>TRADE PAYABLES - INSURANCE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

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3.1432. Nonpriority creditor's name and mailing address LOCOMOTE EXPRESS LLC P O BOX 2693 HUNTINGTON WV 25726	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$10,114.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1433. Nonpriority creditor's name and mailing address LOGISTICK, INC 19880 STATE LINE ROAD SOUTH BEND IN 46637-1545	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$452.65
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1434. Nonpriority creditor's name and mailing address LOGISTICS CONCIERGE DANIEL LUI 1 MEADOWLANDS PLZ STE 200 EAST RUTHERFORD NJ 07073-2150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,533.71
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.1435. Nonpriority creditor's name and mailing address LOGISTICS FREIGHT VGIRALDO@LFS-INC.COM P O BOX 720637 MIAMI FL 33172-0011 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$153.68
3.1436. Nonpriority creditor's name and mailing address LOGISTICS PLUS KRISTEN RZODKIEWICZ 1406 PEACH ST ERIE PA 16501-1879 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,124.38
3.1437. Nonpriority creditor's name and mailing address LOGISTXS INC MICHAEL ZITO C47134 1500 ROUTE 517 SUITE 305 HACKETTSTOWN NJ 07840-2717 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$325.00

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3.1438. Nonpriority creditor's name and mailing address LONG FENCE FENCING DIRECT TIM LONG 1910 BETSON CT ODENTON MD 21113-1124 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1439. Nonpriority creditor's name and mailing address LONZA INC % ODYSSEY LOGISTICS & TECHNOLOGY PO BOX 19749 DEPT123 CHARLOTTE NC 28219-9749 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$820.68
3.1440. Nonpriority creditor's name and mailing address LONZA INC JUSTIN BOYCE PO BOX 19749 DEPT123 CHARLOTTE NC 28219-9749 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,350.36

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<p>3.1441. Nonpriority creditor's name and mailing address</p> <p>LORDS VALLEY TOWING 500 ROUTE 739 LORDS VALLEY PA 18428</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$412.00</p>
<p>3.1442. Nonpriority creditor's name and mailing address</p> <p>L'OREAL CONSUMER PRODS DIV TRANSPORTATION DEPT, KATHY OLDAK 35 BROADWAY RD CRANBURY NJ 08512-5411</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$27,462.66</p>
<p>3.1443. Nonpriority creditor's name and mailing address</p> <p>L'OREAL PARIS KATHY OLDAK 35 BROADWAY RD CRANBURY NJ 08512-5411</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,630.43</p>

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3.1444. Nonpriority creditor's name and mailing address LOUNSBERRY TRUCK STOP ROUTE 17 AT EXPRESSWAY 63 NICHOLS NY 13812	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$66.60
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1445. Nonpriority creditor's name and mailing address LOWE AND MOYER GARAGE INC 731 CHURCH ST FOGELSVILLE PA 18051	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$36,654.31
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1446. Nonpriority creditor's name and mailing address LT INTERNATIONAL COMPANY MARK THIENVANICH PO BOX 155 PROSPER TX 75078-0155	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,680.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1447. Nonpriority creditor's name and mailing address LUCKY'S ENERGY SERVICE, INC 6801 W 73RD STREET BOX 637 BEDFORD PARK IL 60499-0637 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$123,234.39
3.1448. Nonpriority creditor's name and mailing address LUCKY'S TRAILER SALES, INC 402 VT ROUTE 107 SOUTH HROYALTON VT 05068 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$925.67
3.1449. Nonpriority creditor's name and mailing address LUMIKO USA INC PABLO GUARDERES 47 COMMERCE DR STE 3 CRANBURY NJ 08512-3503 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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<p>3.1450. Nonpriority creditor's name and mailing address</p> <p>LYKINS OIL COMPANY ATTN: JIM HUBER 5163 WOLFPEN PLEASANT HILL RD MILFORD OH 45150</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$36,689.04</p>
<p>3.1451. Nonpriority creditor's name and mailing address</p> <p>M & K MOBILE SERVICES 8308 SPENCER LAKE RD MEDINA OH 44256</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$406.00</p>
<p>3.1452. Nonpriority creditor's name and mailing address</p> <p>M BLOCK & SONS INC DONNA CHURMS 5020 W 73RD ST BEDFORD PARK IL 60638-6612</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$32.40</p>

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<p>3.1453. Nonpriority creditor's name and mailing address</p> <p>M BLOCK & SONS INC DONNA CHURMS 5020 W 73RD ST BEDFORD PARK IL 60638-6612</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$192.96</p>
<p>3.1454. Nonpriority creditor's name and mailing address</p> <p>M HOLLAND COMPANY % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,549.67</p>
<p>3.1455. Nonpriority creditor's name and mailing address</p> <p>M&N SALES CO, INC 415 KEIM BLVD BURLINGTON NJ 08016</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,258.90</p>

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<p>3.1456. Nonpriority creditor's name and mailing address</p> <p>M.D.S. AUTO BODY 369 THOMAS ST. NEWARK, NJ 07114</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$10,739.90</p>
<p>3.1457. Nonpriority creditor's name and mailing address</p> <p>MAC TRUCK PARTS & EQUIPMENT 2463 PECK SETTLEMENT ROAD JAMESTOWN NY 14701</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$192.18</p>
<p>3.1458. Nonpriority creditor's name and mailing address</p> <p>MACHINISTS MONEY PURCHASE PENSION FUND 140 SYLVAN AVENUE SUITE 303 ENGLEWOOD CLIFFS NJ 07632</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$403,918.35</p>

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3.1459. Nonpriority creditor's name and mailing address MACK FINANCIAL SERVICES DIVISION OF VFS US LLC PO BOX 26131 GREENSBORO NC 27402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$0.00
Date or dates debt was incurred _____	Basis for the claim: EQUIPMENT LEASE	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.1460. Nonpriority creditor's name and mailing address MACKBACH*GLENN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1461. Nonpriority creditor's name and mailing address MACYS ACCOUNTS PAYABLE PO BOX 8251 MASON OH 45040-5251	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$2,188.25
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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<p>3.1462. Nonpriority creditor's name and mailing address</p> <p>MADISON SECURITY GROUP, INC 31-37 KIRK STREET LOWELL MA 01852</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$8,207.97</p>
<p>3.1463. Nonpriority creditor's name and mailing address</p> <p>MAGGIO DATA FORMS CLAIMS DEPT 1735 EXPRESSWAY DR N HAUPPAUGE NY 11788-5303</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$605.94</p>
<p>3.1464. Nonpriority creditor's name and mailing address</p> <p>MAGGIO DATA FORMS CANDICE SHIOPPA 1735 EXPRESSWAY DR N HAUPPAUGE NY 11788-5303</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,745.04</p>

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3.1465. Nonpriority creditor's name and mailing address MAGNA IND TERRY BUNDY 2233 WEST 110 ST CLEVELAND OH 44102-3511	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$2,242.25
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1466. Nonpriority creditor's name and mailing address MAHON*EDWARD Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1467. Nonpriority creditor's name and mailing address MAINE EMPLOYERS MUTUAL INS CO PO BOX 11409 PORTLAND ME 04104	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: TRADE PAYABLES - INSURANCE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1468. Nonpriority creditor's name and mailing address MAINE GRAINS KRISTIAN POTTLE 42 COURT ST SKOWHEGAN ME 04976-1808 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,256.94
3.1469. Nonpriority creditor's name and mailing address MAINE TURNPIKE AUTHORITY VIOLATION PROCESSING CNTR 2360 CONGRESS STREET PORTLAND ME 04102 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2.25
3.1470. Nonpriority creditor's name and mailing address MAINFREIGHT USA NANCY SANCHEZ 300 ED WRIGHT LA STE L NEWPORT NEWS VA 23606-4384 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$511.80

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3.1471. Nonpriority creditor's name and mailing address MALCO PRODUCTS INC DORIS MATUCH 361 FAIRVIEW AVE BARBERTON OH 44203 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$99.90
3.1472. Nonpriority creditor's name and mailing address MALL *JABRAN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1473. Nonpriority creditor's name and mailing address MANHATTAN ASSOCIATES P.O. BOX 405696 ATLANTA GA 30368 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$533.13

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<p>3.1474. Nonpriority creditor's name and mailing address</p> <p>MANITOULIN YVONNE BAILEY P.O. BOX 390 GORE BAY ON POP1HO CANADA</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,404.46</p>
<p>3.1475. Nonpriority creditor's name and mailing address</p> <p>MANITOULIN TRANSPORT YVONNE BAILEY PO BOX 390 GORE BAY ON POP1HO CANADA</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$11,340.44</p>
<p>3.1476. Nonpriority creditor's name and mailing address</p> <p>MANITOULIN TRANSPORT YVONNE BAILEY PO BOX 390 GORE BAY ON POP1H02190 CANADA</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$328.00</p>

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3.1477. **Nonpriority creditor's name and mailing address**

MANITOULIN TRANSPORT LTD.
PO BOX 390
GORE BAY ON P0P 1H0
CANADA

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$51,591.71

3.1478. **Nonpriority creditor's name and mailing address**

MANITOULIN TRANSPORT LTD.
YVONNE BAILEY
PO BOX 390
GORE BAY ON POP1H02190
CANADA

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$365,989.54

3.1479. **Nonpriority creditor's name and mailing address**

MANNING*DAVID
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1480. **Nonpriority creditor's name and mailing address**

MANNING*PAUL
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1481. **Nonpriority creditor's name and mailing address**

MANSFIELD OIL COMPANY
OF GAINESVILLE, INC
P.O. BOX 733706
DALLAS TX 75373-3706

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$519.44

3.1482. **Nonpriority creditor's name and mailing address**

MANSFIELD OIL COMPANY
OF GAINESVILLE, INC
P.O. BOX 733706
DALLAS TX 75373-3706

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$214,333.83

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1483. Nonpriority creditor's name and mailing address MANUEL STUBB SO PLAINFIELD**SAFETY** 135 WEST 238TH ST BRONX NY 10463	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$219.80
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1484. Nonpriority creditor's name and mailing address MANZI BONANNO AND BOWERS ATTY 280 MERRIMACH ST STE B METHUEN MA 01844	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1485. Nonpriority creditor's name and mailing address MAPFRE INS RUDY BERGERON CLAIM REP 11 GORE RD WEBSTER MA 01570	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1486. **Nonpriority creditor's name and mailing address**

MAPFRE INSURANCE
LINDA BREWER
11GORE RD
WEBSTER MA 01570

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1487. **Nonpriority creditor's name and mailing address**

MARCO POLO LOGISTICS
PHILIP LEE
10929 FRANKLIN AVE #W
FRANKLIN PARK IL 60131-1430

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,021.00

3.1488. **Nonpriority creditor's name and mailing address**

MARIAM NIVEDITHA AND RAJU GEORGE
1331WORLD AVE
ELMONT NY 11003

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1489. Nonpriority creditor's name and mailing address MARINE RECOVERY MARISSA MIELKE 1475 E WOODFIELD RD STE 500 SCHAUMBURG IL 60173-4980 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,266.75
3.1490. Nonpriority creditor's name and mailing address MARKO RADIATOR, INC. 725 WEST COAL ST. SHENANDOAH PA 17976 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,079.75
3.1491. Nonpriority creditor's name and mailing address MARLBOROUGH COUNTRY 45 NORTH MAIN ST MARLBOROUGH CT 06447-1309 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$240.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1492. **Nonpriority creditor's name and mailing address**

MARS NICK CHAMBERS
295 BROWN ST
ELIZABETHTOWN PA 17022

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1493. **Nonpriority creditor's name and mailing address**

MARSH*DALE
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1494. **Nonpriority creditor's name and mailing address**

MARSHALL WOOD WORKS LTD
ROBERT SPEHAR
1500 SPRING GARDEN AVE
PITTSBURGH PA 15212-3633

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,006.72

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1495. Nonpriority creditor's name and mailing address MARYLAND DISTRICT COURT TRAFFIC PROCESSING CENTER P.O. BOX 6676 ANNAPOLIS MD 21401-0676 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$303.00
3.1496. Nonpriority creditor's name and mailing address MARYLAND ELEVATOR SERVICES,INC 2147 PRIEST BRIDGE DRIVE CROFTON MD 21114 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$74.00
3.1497. Nonpriority creditor's name and mailing address MARYLAND FINANCIAL INVESTORS INC SCOTT CHERRY 2800 QUARRY LAKE DR STE 340 BALTIMORE MD 12109 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1498. Nonpriority creditor's name and mailing address MARYLAND PLASTICS TOMAS DAVILE PO BOX 472 FEDERALSBURG MD 21632-0472 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,624.78
3.1499. Nonpriority creditor's name and mailing address MARZEN FEED & HARDWARE 75 HARRITY RD. LEHIGHTON PA 18235 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$35.20
3.1500. Nonpriority creditor's name and mailing address MASCO CABINETRY CINDY MYERS 641 MADDOX DR CULPEPER VA 22701-4100 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$455.04

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1501. Nonpriority creditor's name and mailing address</p> <p>MASCO CABINETRY CINDY MYERS 641 MADDOX DRIVE CULPEPER VA 22701-4100</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$598.90</p>
<p>3.1502. Nonpriority creditor's name and mailing address</p> <p>MASERGY COMMUNICATIONS INC PO BOX 733938 DALLAS TX 75373-3938</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$18,684.99</p>
<p>3.1503. Nonpriority creditor's name and mailing address</p> <p>MASIS STAFFING SOLUTIONS LLC PO BOX 204653 DALLAS TX 75320-4653</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,759.16</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1504. Nonpriority creditor's name and mailing address MASKCARA COSMETICS STEPHEN HEPNER 1987 S 2940 E SAINT GEORGE UT 84790-5111 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$153.00
3.1505. Nonpriority creditor's name and mailing address MASONITE JASPER CHIGUMA 970 NEW YORK RTE 11 KIRKWOOD NY 13795 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$932.18
3.1506. Nonpriority creditor's name and mailing address MASONITE JASPER CHIGUMA 970 NEW YORK RTE 11 KIRKWOOD NY 13795-1649 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$60.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1507. Nonpriority creditor's name and mailing address MASONITE DOOR FAB JASPER CHIGUMA 970 NY ROUTE 11 KIRKWOOD NY 13795	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$341.27
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1508. Nonpriority creditor's name and mailing address MASTELE*ELIZABETH Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred <hr/>	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1509. Nonpriority creditor's name and mailing address MASTER MECHANICAL CORP 75 VERDI STREET FARMINGDALE NY 11735	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,078.10
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1510. Nonpriority creditor's name and mailing address MASTERMAN'S LLP AUBURN IND PARK, PO BOX 411 11C ST, BLDG 10 AUBURN MA 01501-0411 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$49.83
3.1511. Nonpriority creditor's name and mailing address MASTRILLI*BRUCE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1512. Nonpriority creditor's name and mailing address MATERIAL HANDLING EXCHANGE KATIE HERBERT 1800 CHURCHMAN AVE INDIANAPOLIS IN 46203-2900 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$945.03

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1513. **Nonpriority creditor's name and mailing address**

MATTHEW FAHY V
NEW ENGLAND MOTOR FREIGHT INC ET AL
MIGUEL IRAHETA
164 NEW YORK AVE
APT 1
JERSEY CITY NJ 07307

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1514. **Nonpriority creditor's name and mailing address**

MATTHEW NELSON
ATTORNEY FOR THE PLAINTIFF DAVE
FRISSORA ESQ
LAW OFFICES OF DAVE FRISSORA
4656 EXECUTIVE DR STE 201B
COLUMBUS OH 43220

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1515. **Nonpriority creditor's name and mailing address**

MATTHEW NELSON V
NEW ENGLAND MOTOR FREIGHT INC
JARED GALYON
42 EAST MAIN ST
PO BOX 201
HARVEYSBURG OH 45032

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1516. Nonpriority creditor's name and mailing address MATTRESS LAND ADAM JOHNSON 5610 CLEVELAND AVE COLUMBUS OH 43231-4059 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$535.00
3.1517. Nonpriority creditor's name and mailing address MAUCHER*ROBERT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1518. Nonpriority creditor's name and mailing address MAXLITE TINA GABRIEL 12 YORK AVE WEST CALDWELL NJ 07006-6411 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,178.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1519. Nonpriority creditor's name and mailing address MAXSOLAR LLC 805 THIRD AVENUE 20TH FLOOR NEW YORK NY 10022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,697.76
3.1520. Nonpriority creditor's name and mailing address MCCLELLAND*JAMES Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1521. Nonpriority creditor's name and mailing address MCCLOUGHAN*ANDREW Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1522. Nonpriority creditor's name and mailing address MCCOURT LABEL CABINET CO 20 EGBERT LANE LEWIS RUN PA 16738 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,682.17
3.1523. Nonpriority creditor's name and mailing address MCCUE CORPORATION STEVE MOONEY 125 WATER STREET DANVERS MA 01923 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$501.79
3.1524. Nonpriority creditor's name and mailing address MCGRATH OFFICE EQUIPMENT PO BOX 932 JOLIET IL 60434 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$86.50

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1525. **Nonpriority creditor's name and mailing address**

MCGRIFF*ANTHONY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1526. **Nonpriority creditor's name and mailing address**

MCINTOSH ENERGY COMPANY INC
1923 BREMER ROAD
FORT WAYNE IN 46803

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$26,003.10

3.1527. **Nonpriority creditor's name and mailing address**

MCLANE NORTHEAST
PO BOX 6131
TEMPLE TX 76503-6131

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$6,665.49

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1528. Nonpriority creditor's name and mailing address MCMASTER CARR DAVE SEE PO BOX 7690 CHICAGO IL 60680-7690 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,441.25
3.1529. Nonpriority creditor's name and mailing address MCS LIFE INSURANCE COMPANY ATTN:FINANCE DEPARTMENT PO BOX 193310 SAN JUAN PR 00919-3310 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,694.76
3.1530. Nonpriority creditor's name and mailing address MEDEXPRESS BILLING ATTN: #7958J PO BOX 7964 BELFAST ME 04915 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$240.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1531. Nonpriority creditor's name and mailing address</p> <p>MEDITERRANEAN SHIPPING 700 WATERMARK BLVD MOUNT PLEASANT SC 29464</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$460.00</p>
<p>3.1532. Nonpriority creditor's name and mailing address</p> <p>MEDTRONIC JUDY MALDONADO 201 SABANETAS INDUSTRIAL PARK PONCE PR 00716-1602</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$351.60</p>
<p>3.1533. Nonpriority creditor's name and mailing address</p> <p>MEDTRONIC P O BOX 61050 FORT MYERS FL 33906-1050</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$751.28</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1534. Nonpriority creditor's name and mailing address MEIJER 93 MAY GRACEFFA 2929 WALKER NW GRAND RAPIDS MI 49544-6402 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$489.60
3.1535. Nonpriority creditor's name and mailing address MEIJER 93 KERRY JOHNSONASE 2929 WALKER AVE NW GRAND RAPIDS MI 49544-6402 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,988.75
3.1536. Nonpriority creditor's name and mailing address MELINDA CARNEY 2021 VIA FLORENCE RD CHARLOTTESVILLE VA 22911 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1537. Nonpriority creditor's name and mailing address MELITTA USA CLAIMS DEPT 13925 58TH ST N CLEARWATER FL 33760-3721 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,242.16
3.1538. Nonpriority creditor's name and mailing address MELITTA USA CLAIMS DEPT 13925 58TH STREET N CLEARWATER FL 33760-3721 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$931.44
3.1539. Nonpriority creditor's name and mailing address MELLOTT & MELLOTT SPENCER SKAATS 312 WALNUT ST STE 2500 CINCINNATI OH 45202-4024 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$31.68

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1540. Nonpriority creditor's name and mailing address</p> <p>MERCANTILE DEVELOPMENT CHRISTOPHER CARROLL 10 WATERVIEW DR SHELTON CT 06484-4300</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$295.25</p>
<p>3.1541. Nonpriority creditor's name and mailing address</p> <p>MERCANTILE DEVELOPMENT CHRISTOPHER CARROLL 10 WATERVIEW DRIVE SHELTON CT 06484-4300</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$44.95</p>
<p>3.1542. Nonpriority creditor's name and mailing address</p> <p>MERISSA L. COHEN 2000 SUBTRUST U/W/O JON SHEVELL 1-71 NORTH AVENUE EAST ELIZABETH NJ 07201</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>INSIDER PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$11,578.00</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1543. **Nonpriority creditor's name and mailing address**

MEROLA TILE
TATYANA TSODIKOV
217 COUNTY ROAD 522
MANALAPAN NJ 07726-8813

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$758.45

3.1544. **Nonpriority creditor's name and mailing address**

MEROLA TILE SOMERTILE
217 COUNTY RD 522
MANALAPAN NJ 07726

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1545. **Nonpriority creditor's name and mailing address**

MESCA FREIGHT SERVICES
P.O. BOX 70000
NEWARK NJ 07101-3521

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$13,156.72

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1546. **Nonpriority creditor's name and mailing address**

MET LIFE
PO BOX 8500-3895
PHILADELPHIA PA 19178-3895

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$6,194.11

3.1547. **Nonpriority creditor's name and mailing address**

METLIFE A/S/O NON VAN NGUYEN
POB 2204
CHARLOTTE NC 28241-2204

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1548. **Nonpriority creditor's name and mailing address**

METLIFE A/S/O RICHARD PLANTE
POB 2204
CHARLOTTE NC 28241-2204

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1549. Nonpriority creditor's name and mailing address METROPOLITAN LIFE INSURANCE CO P O BOX 360229 PITTSBURGH PA 15251-6229 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$41,398.26
3.1550. Nonpriority creditor's name and mailing address MI LOGISTICS DBA DLS WORLDWIDE 10715 PAXTONS PL DAVIDSON NC 28036-7593 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,744.12
3.1551. Nonpriority creditor's name and mailing address MICA CORPORATION ALPHONSE ACONFORA 9 MOUNTAIN VIEW RD SHELTON CT 06484-6404 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1552. Nonpriority creditor's name and mailing address MICHAEL AND ANDREA WOOD 106 PEARL ST WOBURN MA 01801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$820.00
3.1553. Nonpriority creditor's name and mailing address MICHAEL BIGG JR., INC. BOX 181 ROUTE 32 VAILS GATE NY 12584 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,025.50
3.1554. Nonpriority creditor's name and mailing address MICHAEL HEFFRON AND NEMF WARD GREENBERG HELLER AND REIDY LLP SCOTT JEANNETTE ESQ 1800 BAUSCH & LOMB PL ROCHESTER NY 14604 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1555. **Nonpriority creditor's name and mailing address**

MICHAEL SINGLEY
D'ARCY JOHNSON DAY
RICHARD J ALBUQUERQUE ESQ
3120 FIRE RD
STE 100
EGG HARBOR TOWNSHIP NJ 08234

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1556. **Nonpriority creditor's name and mailing address**

MICHAEL YOUNG
ATTORNEY FOR THE PLAINTIFF
SIMON AND SIMON PC
1815 MARKET ST STE 2000
PHILADELPHIA PA 19103

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1557. **Nonpriority creditor's name and mailing address**

MICHELIN NORTH AMERICA
CLAIMS DEPT
PO BOX 100860
ATLANTA GA 30384-0860

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$33,279.96

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1558. Nonpriority creditor's name and mailing address MICHELIN NORTH AMERICA, INC. PO BOX 100860 ATLANTA GA 30384-0860 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$40,384.54
3.1559. Nonpriority creditor's name and mailing address MID ATLANTIC AIR FILTER % TLI 321 N FURNACE ST STE 300 BIRDSBORO PA 19508-2057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1560. Nonpriority creditor's name and mailing address MID ATLANTIC TRUCK CENTRE 525 LINDEN AVENUE WEST LINDEN NJ 07036 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,044.79

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1561. Nonpriority creditor's name and mailing address</p> <p>MIDDLETOWN TRACTOR SALES JOHN DEERE DEALER 2050 BOYERS DR FAIRMONT WV 26554-8475</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>
<p>3.1562. Nonpriority creditor's name and mailing address</p> <p>MIDRANGE SOLUTIONS, INC. 200 SHEFFIELD STREET SUITE 103 MOUNTAINSIDE NJ 07092</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$250.00</p>
<p>3.1563. Nonpriority creditor's name and mailing address</p> <p>MIDWEST MOBILE MAINTENANCE 2323 GOLFVIEW DR JOLIET IL 60435</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,357.51</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1564. Nonpriority creditor's name and mailing address MIDWEST MOTOR EXPRESS KRISTIN JANGULA PO BOX 1058 BISMARCK ND 58502-1058 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$600.00
3.1565. Nonpriority creditor's name and mailing address MIDWEST MOTOR EXPRESS KRISTIN JANGULA PO BOX 1058 BISMARCK ND 58502-1058 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$341.63
3.1566. Nonpriority creditor's name and mailing address MIDWEST MOTOR EXPRESS, INC PO BOX 1496 5015 EAST MAIN BISMARCK ND 58501 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$57,321.62

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1567. **Nonpriority creditor's name and mailing address**

MIDWEST MOTOR EXPRESS, INC
PO BOX 1496
5015 EAST MAIN
BISMARCK ND 58501

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$347.46

3.1568. **Nonpriority creditor's name and mailing address**

MILLER BROS FURNITURE INC
MATTHEW B TALADY
ATTORNEY AT LAW
528 LIBERTY BLVD
DUBOIS PA 15801

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1569. **Nonpriority creditor's name and mailing address**

MILLER HOLDING LLC
167 HUTTLESTON AVE
FAIRHAVEN MA 02719

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1570. Nonpriority creditor's name and mailing address MILLER'S TOWING P O BOX 26217 AKRON OH 44319 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,150.00
3.1571. Nonpriority creditor's name and mailing address MILLIKEN MILLWORK % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,531.37
3.1572. Nonpriority creditor's name and mailing address MILLS COMPANY CLAIMS DEPT 3007 HARDING HWY E BLDG MARION OH 43302 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,519.15

Debtor **New England Motor Freight, Inc.**

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3.1573. **Nonpriority creditor's name and mailing address**

MILTON REGIONAL WASTEWATER
SEWER AUTHORITY
PO BOX 725
BLOOMBURG PA 17815

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$189.10

3.1574. **Nonpriority creditor's name and mailing address**

MIRABITO FUEL GROUP
THE METROCENTER-49 COURT ST
PO BOX 5306
BINGHAMTON NY 13902

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$96,355.04

3.1575. **Nonpriority creditor's name and mailing address**

MITCHELL*DANIEL
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.1576. Nonpriority creditor's name and mailing address MITSUBISHI INTL FOOD DANA MCKINNEY , STE 400 5080 TUTTLE CROSSING BLVD DUBLIN OH 43016-3540 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,574.92
3.1577. Nonpriority creditor's name and mailing address MJ FISH LLC 302 WEST MAIN STE 115 AVON CT 06001 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1578. Nonpriority creditor's name and mailing address MKJ LOGISTICS LINDA MC LEAN 1776 CHALKER HILL GLASTONBURY CT 06033-2643 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,590.40

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3.1579. Nonpriority creditor's name and mailing address MLL LOGISTICS, LLC C/O BERRY PLASTICS 18250 FRESH LAKE WAY BOCA RATON FL 33498 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,147.29
3.1580. Nonpriority creditor's name and mailing address MMTA SERVICES, INC 142 WHITTEN ROAD PO BOX 857 AUGUSTA ME 04332-0857 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$45.00
3.1581. Nonpriority creditor's name and mailing address MODE TRANSPORTATION GRACE SMETANA 2000 CLEARWATER DR OAK BROOK IL 60523-8809 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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<p>3.1582. Nonpriority creditor's name and mailing address</p> <p>MODE TRANSPORTATION CHRISTIE WILLIAMS 6077 PRIMACY PKWY FL 4 STE 400 MEMPHIS TN 38119-5742</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$855.14</p>
<p>3.1583. Nonpriority creditor's name and mailing address</p> <p>MODE TRANSPORTATION WHITNEY AKIL 6077 PRIMACY PKWY FL 4 STE 400 MEMPHIS TN 38119-5742</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,154.52</p>
<p>3.1584. Nonpriority creditor's name and mailing address</p> <p>MODERN HANDLING EQUIPMENT CO. PO BOX 95000-5770 PHILADELPHIA PA 19195-5770</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$5,789.74</p>

Debtor **New England Motor Freight, Inc.**

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3.1585. Nonpriority creditor's name and mailing address MODULAR CLOSETS BEN BLOCH 1985 RUTGERS UNIVERS LAKEWOOD NJ 08701-4569 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,062.96
3.1586. Nonpriority creditor's name and mailing address MOEN INC JUSTINE PETCHLER PO BOX 8022 NORTH OLMSTED OH 44070-8022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,057.26
3.1587. Nonpriority creditor's name and mailing address MOEN INCORPORATED JUSTINE PETCHLER PO BOX 8022 NORTH OLMSTED OH 44070-8022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,771.67

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<p>3.1588. Nonpriority creditor's name and mailing address</p> <p>MOHAWK DISTRIBUTION CHRISTINA SMITH 26B EAGLE DR HOGANSBURG NY 13655</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$63.61</p>
<p>3.1589. Nonpriority creditor's name and mailing address</p> <p>MOHAWK GLOBAL LOGISTICS KAREN SEVIER PO BOX 3065 SYRACUSE NY 13220-3065</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,725.00</p>
<p>3.1590. Nonpriority creditor's name and mailing address</p> <p>MONELLI FINE FOODS PAUL SFERRAZZA 176 QUALITY PLZ HICKSVILLE NY 11801-6527</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$519.24</p>

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3.1591. Nonpriority creditor's name and mailing address MONOPRICE ,INC PO BOX 740417 LOS ANGELES CA 90074-0417	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$122.31
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1592. Nonpriority creditor's name and mailing address MOON*BRIAN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1593. Nonpriority creditor's name and mailing address MORENO NY INC JOY LO 75 MODULAR AVE COMMACK NY 11725-5705	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,419.25
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1594. Nonpriority creditor's name and mailing address MORRIS COUNTY JOINT INS FUND C/O HANOVER TWP PO BOX 268 NEWTON NJ 07860 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,278.10
3.1595. Nonpriority creditor's name and mailing address MORRIS J GOLOMBECK INC SHELDON GOLOMBECK 960 FRANKLIN AVE BROOKLYN NY 11225-2403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$782.00
3.1596. Nonpriority creditor's name and mailing address MOST RELIABLE COURIER INC 14760 175TH ST JAMAICA NY 11434 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.1597. Nonpriority creditor's name and mailing address MOUNTAIN TARP BILL CHRISTIE 2580 E SHARON RD SHARONVILLE OH 45241-1847 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.1598. Nonpriority creditor's name and mailing address MPS % QUAD GRAPHICS 891 AUTO PARTS PL MARTINSBURG WV 25403-2358 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,249.20
3.1599. Nonpriority creditor's name and mailing address MSC INDUSTRIAL SUPPLY CO PO BOX 953635 SAINT LOUIS MO 63195-3635 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$435.45

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3.1600. Nonpriority creditor's name and mailing address MSN 86 CARGO PLAZA/BLDG JAMAICA NY 11430 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$75.00
3.1601. Nonpriority creditor's name and mailing address MTA B & T VIOLATION PROCESSING CENTER P O BOX 15186 ALBANY NY 12212-5186 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$483.00
3.1602. Nonpriority creditor's name and mailing address MTD DISTRIBUTION CENTER KATHY FIDLER 701 THEO MOLL DR WILLARD OH 44890-9289 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00

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<p>3.1603. Nonpriority creditor's name and mailing address</p> <p>MULTI MODE LOGISTICS % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,746.80</p>
<p>3.1604. Nonpriority creditor's name and mailing address</p> <p>MURATEC AMERICA, INC 3301 E PLANO PKWY #100 PLANO TX 75074-7202</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$295.72</p>
<p>3.1605. Nonpriority creditor's name and mailing address</p> <p>MURPHY TRACTOR & EQUIP JOHN DEERE DEALER 11441 MOSTELLER RD CINCINNATI OH 45241-1829</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

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3.1606. Nonpriority creditor's name and mailing address MURPHY TRACTOR & EQUIP JOHN DEERE DEALER 11441 MOSTELLER RD CINCINNATI OH 45241-1829 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$572.61
3.1607. Nonpriority creditor's name and mailing address MVP GROUP ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$129.00
3.1608. Nonpriority creditor's name and mailing address MW TRANSPORTATION SYSTEMS, INC PO BOX 388077 CHICAGO IL 60638 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,021.00

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3.1609. Nonpriority creditor's name and mailing address MYBAR LABOR SERVICES ATTN MARIA FRESCHI PO BOX 5178 NORTH BRANCH STATION SOMERVILLE NJ 08876 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,495.13
3.1610. Nonpriority creditor's name and mailing address N F I INDUSTRIES CENNIE LAPORTE P O BOX 855 CHAMPLAIN NY 12919-0855 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$565.09
3.1611. Nonpriority creditor's name and mailing address N.J. MANUFACTURERS INS.CO. PO BOX 70167 PHILADELPHIA PA 19176-0167 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$517,200.00

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3.1612. Nonpriority creditor's name and mailing address NAILOR INDUSTRIES ELIZABETH BRUCE 98 TORYORK DR TORONTO ON M9L1X6 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,822.81
3.1613. Nonpriority creditor's name and mailing address NAPA AUTO PARTS PO BOX 414988 BOSTON MA 02241-4988 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$42.55
3.1614. Nonpriority creditor's name and mailing address NARRAGANSETT BAY COMMISSION PO BOX 9668 DEPT.25 PROVIDENCE RI 02940-9668 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$54.35

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3.1615. **Nonpriority creditor's name and mailing address**

NASH*WILLIAM
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1616. **Nonpriority creditor's name and mailing address**

NASSAU CANDY
TRACY MCLAUGHLIN
530 W JOHN ST
HICKSVILLE NY 11801-1039

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$345.13

3.1617. **Nonpriority creditor's name and mailing address**

NASSAU CANDY
530 W JOHN ST
HICKSVILLE NY 11801-1039

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$143.33

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1618. **Nonpriority creditor's name and mailing address**

NASSAU COUNTY DEPT OF HEALTH
JOHN L LOVEJOY, 140500 BEP/X1
200 COUNTY SEAT DRIVE
MINEOLA NY 11501

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,125.00

3.1619. **Nonpriority creditor's name and mailing address**

NATCO PRODUCTS
JENNIFER KNEATH
155 BROOKSIDE AVE
WEST WARWICK RI 02893-3800

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,860.53

3.1620. **Nonpriority creditor's name and mailing address**

NATHAN SPEARMAN V
NEW ENGLAND MOTOR FREIGHT INC
ATTORNEY FOR THE DEFENDANT KEVIN J
HOLLEY
GUNNING AND LAFAZIA INC
33 COLLEGE HILL RD STE25B
WARWICK RI 02886

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1621. Nonpriority creditor's name and mailing address NATIONAL BUSINESS EQUIPMENT 505 BRADFORD ST ALBANY NY 12206 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$35.62
3.1622. Nonpriority creditor's name and mailing address NATIONAL BUSINESS FURNITURE % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$792.71
3.1623. Nonpriority creditor's name and mailing address NATIONAL FIRE AND MARINE INSURANCE CO 1314 DOUGLAS ST STE 1400 OMAHA NE 68102-1944 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1624. **Nonpriority creditor's name and mailing address**

NATIONAL GRID
POB 29793
NEW YORK NY 10087-9793

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1625. **Nonpriority creditor's name and mailing address**

NATIONAL GRID
PO BOX 11791
NEWARK NJ 07101-4791

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,277.65

3.1626. **Nonpriority creditor's name and mailing address**

NATIONAL GRID
PO BOX 11742
NEWARK NJ 07101-4742

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$6,081.92

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1627. Nonpriority creditor's name and mailing address NATIONAL GRID PO BOX 11735 NEWARK NJ 07101-4735 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,996.93
3.1628. Nonpriority creditor's name and mailing address NATIONAL PUBLIC SEATING VEETA ISRAEL 149 ENTIN RD CLIFTON NJ 07014-1424 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1629. Nonpriority creditor's name and mailing address NATIONAL PUBLIC SEATING SASHA SANTO 149 ENTIN RD CLIFTON NJ 07014-1424 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$550.75

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1630. Nonpriority creditor's name and mailing address</p> <p>NATIONAL PUBLIC SEATING EVELYN AMEERULLAH 149 ENTIN RD CLIFTON NJ 07014-1424</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,498.60</p>
<p>3.1631. Nonpriority creditor's name and mailing address</p> <p>NATIONAL REFRIGERATION JANELLE CARR 539 DUNKSFERRY RD BENSALEM PA 19020-5908</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,755.32</p>
<p>3.1632. Nonpriority creditor's name and mailing address</p> <p>NATIONAL RETAIL SYSTEMS 1624 16TH STREET NORTH BERGEN NJ 07047</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$200.00</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1633. **Nonpriority creditor's name and mailing address**

NATIONAL SURETY CORP
225 W WASHINGTON ST
STE 1800
CHICAGO IL 60606

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1634. **Nonpriority creditor's name and mailing address**

NATIONAL UNION FIRE INS CO OF PITTSBURG
PA
175 WATER ST
NEW YORK NY 10038-4969

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1635. **Nonpriority creditor's name and mailing address**

NATIONWIDE TRANSPORTATION INC
ERICA FAX 331-481-5007
1999 W 75TH STREET
#100
WOODRIDGE IL 60517-2666

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$303.66

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1636. Nonpriority creditor's name and mailing address NATURAL ESSENTIALS STEPHANIE COLE 1199 S CHILLICOTHE RD AURORA OH 44202-8001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,277.50
3.1637. Nonpriority creditor's name and mailing address NATURAL FOODS MATTHEW NANIA 3040 HILL AVE TOLEDO OH 43607-2931 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$742.50
3.1638. Nonpriority creditor's name and mailing address NATURAL SOURCE NUTITION 11135 WALDEN AVE WALDEN NY 14004 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1639. Nonpriority creditor's name and mailing address NATURES BOUNTY TRICIA BATJER 4320 VETERANS MEMORIAL HWY HOLBROOK NY 11741-4504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,249.00
3.1640. Nonpriority creditor's name and mailing address NAUTILUS INC AMANDA FRANCIS 17750 SE 6TH WAY VANCOUVER WA 98683-7565 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$322.08
3.1641. Nonpriority creditor's name and mailing address NB MGMT 7373 WESTSIDE AVE NORTH BERGEN NJ 07047 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1642. Nonpriority creditor's name and mailing address NBF % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,191.14
3.1643. Nonpriority creditor's name and mailing address NCH CORPORATION STEPHANIE LYON 2727 CHEMSEARCH BLVD IRVING TX 75062-6454 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,476.00
3.1644. Nonpriority creditor's name and mailing address NCH CORPORATION JANE DUGYON 2727 CHEMSEARCH BLVD IRVING TX 75062-6454 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,717.76

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1645. Nonpriority creditor's name and mailing address NDAYITABI*DOMINIQUE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1646. Nonpriority creditor's name and mailing address NECCO JAY STOKEL 135 AMERICAN LEGION HWY REVERE MA 02151-2405 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$21,660.00
3.1647. Nonpriority creditor's name and mailing address NEENAH FOUNDRY COMPANY PO BOX 74007026 CHICAGO IL 60674-7026 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$115.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1648. **Nonpriority creditor's name and mailing address**

NELSON VASQUEZ
THE BONGIORNO LAW FIRM
RICHARD M BONGIORNO ESQ
1415 KELLUM PL
STE 205
GARDEN CITY NY 11530

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1649. **Nonpriority creditor's name and mailing address**

NEMF LOGISTICS LLC
I-71 NORTH AVENUE EAST
ELIZABETH NJ 07201

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

INTERCOMPANY PAYABLE

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$864,745.19

3.1650. **Nonpriority creditor's name and mailing address**

NEMF LOGISTICS, LLC
I-71 NORTH AVENUE EAST
ELIZABETH NJ 07201

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

INTERCOMPANY PAYABLE

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$236,489.81

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1651. Nonpriority creditor's name and mailing address NEOPOST USA INC DEPT 3689 PO BOX 123689 DALLAS TX 75312-3689 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$377.45
3.1652. Nonpriority creditor's name and mailing address NEOVIA LOGISTICS % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$702.30
3.1653. Nonpriority creditor's name and mailing address NES GEORGIA INC PO BOX 277329 ATLANTA GA 30384-7329 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$932.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1654. Nonpriority creditor's name and mailing address</p> <p>NESTLE SKIN HEALTH VICKIE CONDREAY 14501 N FREEWAY FORT WORTH TX 76117</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,064.32</p>
<p>3.1655. Nonpriority creditor's name and mailing address</p> <p>NESTLE WATERS NORTH AMERICA DBA NESTLE PURE LIFE PO BOX 856192 LOUISVILLE KY 40285</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$99.58</p>
<p>3.1656. Nonpriority creditor's name and mailing address</p> <p>NETS TRAILER LEASING OF PA LP 1810 RIVER ROAD BURLINGTON NJ 08016</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,016.90</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1657. Nonpriority creditor's name and mailing address</p> <p>NEUW VENTURES LLC 23 NUTEMEG VALLEY RD WOLCOTT CT 06716</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$700.00</p>
<p>3.1658. Nonpriority creditor's name and mailing address</p> <p>NEW ENGLAND KENWORTH 42 WALLACE AVENUE SOUTH PORTLAND ME 04106</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$173.11</p>
<p>3.1659. Nonpriority creditor's name and mailing address</p> <p>NEW ENGLAND KENWORTH MARK BAILEY 24 HALL ST CONCORD NH 03301-3414</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$125.48</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1660. Nonpriority creditor's name and mailing address NEW HAMPSHIRE PETERBILT, INC 1548 ROUTE 3A BOW NH 03304 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$184.16
3.1661. Nonpriority creditor's name and mailing address NEW JERSEY AMERICAN WATER BOX 371331 PITTSBURGH PA 15250-7476 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$500.43
3.1662. Nonpriority creditor's name and mailing address NEW JERSEY MANUFACTURERS JOYCE REISER 301 SULLIVAN WAY WEST TRENTON NJ 08628 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1663. **Nonpriority creditor's name and mailing address**

NEW JERSEY MANUFACTURERS INS CO
301 SULLIVAN WAY
WEST TRENTON NJ 08628

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1664. **Nonpriority creditor's name and mailing address**

NEW LONDON HOSPITALITY LLC
ATTORNEY FOR PLAINTIFF
MCNAMARA AND MCNAMARA
100 PENNSYLVANIA AVE
NIANTIC CT 06357

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1665. **Nonpriority creditor's name and mailing address**

NEW YORK STATE COMPTROLLER
OFFICE OF UNCLAIMED FUNDS
110 STATE STREET, 8TH FLOOR
ALBANY NY 12236

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$22.40

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1666. Nonpriority creditor's name and mailing address</p> <p>NEW YORK STATE INSURANCE FUND ATTN: THOMAS P. ETZEL 225 OAK STREET BUFFALO NY 14203</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ARBITRATION AWARD</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$12,028.85</p>
<p>3.1667. Nonpriority creditor's name and mailing address</p> <p>NEW YORK STATE THRUWAY VIOLATIONS PROCESSING CENTER PO BOX 15186 ALBANY NY 12212-5186</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$176.25</p>
<p>3.1668. Nonpriority creditor's name and mailing address</p> <p>NEW YORK TRUCK PARTS, INC 12 O'GORMAN ROAD WURTSBORO NY 12790</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,171.80</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1669. Nonpriority creditor's name and mailing address NEWARK POOL COMPANY LLC GINA CLIFFORD 682 PASSAIC AVE NUTLEY NJ 07110-1230 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$246.18
3.1670. Nonpriority creditor's name and mailing address NEWLY WEDS FOODS ROSIO RUIZ 4140 W FULLERTON AVE CHICAGO IL 60639-2106 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$668.54
3.1671. Nonpriority creditor's name and mailing address NEWLY WEDS FOODS ROSIO RUIZ 4140 W FULLERTON AVE CHICAGO IL 60639-2106 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$587.03

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1672. Nonpriority creditor's name and mailing address NEXEO SOLUTIONS 14800 CHARLSON RD EDEN PRAIRIE MN 55347-5042	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$629.91
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.1673. Nonpriority creditor's name and mailing address NEXEO SOLUTIONS % CASS INFORMATION SYSTEM PO BOX 17600 SAINT LOUIS MO 63178	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$209.80
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1674. Nonpriority creditor's name and mailing address NEXT DAY TONER SUPPLIES, INC NEXT DAY PLUS 11411 W 183RD ST, SUITE A ORLAND PARK IL 60467	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,016.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.1675. Nonpriority creditor's name and mailing address NGT D/B/A COVERALL SERV CO-HBG 8965 GUILFORD ROAD SUITE 100 COLUMBIA MD 21046 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,861.36
3.1676. Nonpriority creditor's name and mailing address NICHOLS*STEPHEN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1677. Nonpriority creditor's name and mailing address NICK'S TOWING SERVICE, INC 158 E PASSAIC AVE RUTHERFORD NJ 07070 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$805.58

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1678. **Nonpriority creditor's name and mailing address**

NICOLE BOYD
CHRISTINE LASALVIA
ATTORNY FOR THE PLAINTIFF
614 W SUPERIOR AVE 820
CLEVELAND OH 44113

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1679. **Nonpriority creditor's name and mailing address**

NICOLE BOYD V. JACK C. LINDERMAN ET AL.
GALLAGHER SHARP LLP
TODD M. MAEMMERLE
6TH FLOOR BUCKLEY BUILDING
1501EUCLID AVE
CLEVELAND OH 044115

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1680. **Nonpriority creditor's name and mailing address**

NINOS EQUIPMENT
SUSAN LAWRENCE
1110 MITCHELL RD
SCHENECTADY NY 12303-2254

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$18.10

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1681. **Nonpriority creditor's name and mailing address**

NIRMAL DEBNATH
LAW OFFICES OF JOHN TROPP
RENEE ODWYER ESQ
73 MARKET ST
STE 375
YONKERS NY 10710

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1682. **Nonpriority creditor's name and mailing address**

NISSIN INTERNATIONAL TRANSPORT
ANATOLIO BAGNOL
172-47 BAISLEY BLVD
JAMAICA NY 11434-2614

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1683. **Nonpriority creditor's name and mailing address**

NJ E-Z PASS
VIOLATIONS PROCESSING CENTER
PO BOX 4971
TRENTON NJ 08650

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$21.65

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1684. Nonpriority creditor's name and mailing address NJ MANUFACTURERS INSUR CO FOR PHYLLIS A TROY LYNCH TRAUB KEEFE AND ERRANTE PC DONN A SWIFT ESQ 52 TRUMBULL ST NEW HAVEN CT 06510	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1685. Nonpriority creditor's name and mailing address NJ MVC-SPECIAL SERV TITLES PO BOX 008 TRENTON NJ 08646-0008	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$120.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1686. Nonpriority creditor's name and mailing address NNR GLOBAL LOGISTICS CARGO CLAIMS 145 HOOK CREEK BLVD UNIT VALLEY STREAM NY 11581-2299	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$50.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1687. Nonpriority creditor's name and mailing address NO IT BEST CORP CLAIMS DEPT PO BOX 868 FORT WAYNE IN 46801-0868 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,043.03
3.1688. Nonpriority creditor's name and mailing address NON-FERROUS TRADERS INC DANIEL SCHWARTZ 1890 PALMER AVE STE 206 LARCHMONT NY 10538-3059 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,220.00
3.1689. Nonpriority creditor's name and mailing address NORFOLK AND DEDHAM MUTUAL A/S/O JOHN CORTESE 222 AMES ST DEDHAM MA 02026 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1690. Nonpriority creditor's name and mailing address NORMAN E BUCK & SONS 200 MAIN STREET WATSONTOWN PA 17777 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$114.00
3.1691. Nonpriority creditor's name and mailing address NORTEC % AN DERINGER INC 835 COMMERCE PARK DR OGDENSBURG NY 13669-2209 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,058.76
3.1692. Nonpriority creditor's name and mailing address NORTECH LABORATORIES JONATHAN NAZARIEH 125 SHERWOOD AVE FARMINGDALE NY 11735-1717 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,485.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1693. Nonpriority creditor's name and mailing address NORTH AMERICAN COMPOSITES BRENDA DUETHMAN 300 APOLLO DR LINO LAKES MN 55014-3018 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,532.74
3.1694. Nonpriority creditor's name and mailing address NORTH EAST GROUP ASHLEY BURDO 12 NEPCO WAY PLATTSBURGH NY 12903-3961 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,493.98
3.1695. Nonpriority creditor's name and mailing address NORTH HAVEN PAINT & HARDWARE 87 QUINNIPIAC AVENUE NORTH HAVEN CT 06473 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$357.95

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1696. Nonpriority creditor's name and mailing address NORTH JERSEY TRAILER & TRUCK SERVICE, INC 975 BELMONT AVENUE NORTH HALEDON NJ 07508 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,486.00
3.1697. Nonpriority creditor's name and mailing address NORTH TIMBER CABINETRY CLAIMS DEPT 10 PANAS RD FOXBORO MA 02035-1068 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$333.06
3.1698. Nonpriority creditor's name and mailing address NORTH TIMBER CABINETRY CLAIMS DEPT 10 PANAS RD FOXBORO MA 02035-1068 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$242.02

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1699. Nonpriority creditor's name and mailing address NORTHEAST BATTERY & ALTERNATOR P O BOX 842238 BOSTON MA 02284-2238 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$31,024.92
3.1700. Nonpriority creditor's name and mailing address NORTHEAST GREAT DANE PO BOX 5847 HILLSBOROUGH NJ 08844 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$62,033.90
3.1701. Nonpriority creditor's name and mailing address NORTHEAST INDUSTRIAL BATTERIES 2300 DAVID CRIVE BRISTOL PA 19007 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$238.84

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1702. Nonpriority creditor's name and mailing address NORTHEAST STIHL ROBERT BONVINI 2 PATRIOT WAY OXFORD CT 06478-1274 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,004.90
3.1703. Nonpriority creditor's name and mailing address NORTHEAST STIHL ROBERT BONVINI 2 PATRIOTS WAY OXFORD CT 06478-1274 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,014.24
3.1704. Nonpriority creditor's name and mailing address NORTHERN BUSINESS MACHINES, INC 24 TERRY AVENUE BURLINGTON MA 01803 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$375.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1705. Nonpriority creditor's name and mailing address</p> <p>NORTHERN LANDSCAPING ALL YOUR PROPERTY NEEDS LLC 98 ASHBURNHAM ROAD NEW IPSWICH NH 03071</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,774.92</p>
<p>3.1706. Nonpriority creditor's name and mailing address</p> <p>NORTHWEST TRAILER SALE & SERV 120 W ALEXIS ROAD TOLEDO OH 43612</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$4,867.21</p>
<p>3.1707. Nonpriority creditor's name and mailing address</p> <p>NORWICH PHARMACEUTICAL % TRANSAVER 108 WASHINGTON ST MANLIUS NY 13104-1913</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$258.96</p>

Debtor **New England Motor Freight, Inc.**

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3.1708. **Nonpriority creditor's name and mailing address**

NOTHSTEIN*JON
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1709. **Nonpriority creditor's name and mailing address**

NOURISON
FANY GAMERO
5 SAMSON ST
SADDLE BROOK NJ 07663

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,250.00

3.1710. **Nonpriority creditor's name and mailing address**

NOVOLEX DUROBAG
% TRANSPLACE SE
PO BOX 518
LOWELL AR 72745-0518

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$604.20

Debtor **New England Motor Freight, Inc.**

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<p>3.1711. Nonpriority creditor's name and mailing address</p> <p>NOVOLEX DUROBAG % TRANSPLACE SE PO BOX 518 LOWELL AR 72745</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,306.16</p>
<p>3.1712. Nonpriority creditor's name and mailing address</p> <p>NOW FOODS ARTHUR BANASZEWSKI 244 KNOLLWOOD DR BLOOMINGDALE IL 60108-2257</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$4,399.46</p>
<p>3.1713. Nonpriority creditor's name and mailing address</p> <p>NP FOODS 3845 STERN AVE SAINT CHARLES IL 60174</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OPEN AUTO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

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<p>3.1714. Nonpriority creditor's name and mailing address NPC GLOBAL CORP 100 MIDDLESEX AVENUE CARTERET NJ 07008</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$5,781.60</p>
<p>3.1715. Nonpriority creditor's name and mailing address NUUN CO. % LESAINTE LOGISTICS 4487 LESAINTE CT FAIRFIELD OH 45014-5486</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: CARGO CLAIMS</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,780.00</p>
<p>3.1716. Nonpriority creditor's name and mailing address NYC TRANSIT 130 LIVINGSTON ST BROOKLYN NY 11201</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1717. **Nonpriority creditor's name and mailing address**

O SHEA*PAUL
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1718. **Nonpriority creditor's name and mailing address**

OAK HARBOR FREIGHT
CARRIE HULL
PO BOX 1469
AUBURN WA 98071-1469

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$953.56

3.1719. **Nonpriority creditor's name and mailing address**

OAK HARBOR FREIGHT
MISTY GABLEHOUSE
PO BOX 1469
AUBURN WA 98071-1469

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$11,740.14

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1720. Nonpriority creditor's name and mailing address OAK HARBOR FREIGHT TERI RAMSDELL/J MC CRACKEN PO BOX 1469 AUBURN WA 98071-1469 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$57,318.61
3.1721. Nonpriority creditor's name and mailing address OAK HARBOR FREIGHT MISTY GABLEHOUSE PO BOX 1469 AUBURN WA 98071-1469 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$803.38
3.1722. Nonpriority creditor's name and mailing address OAK HARBOR FREIGHT TERI RAMSDELL PO BOX 1469 AUBURN WA 98071-1469 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$5,047.99

Debtor **New England Motor Freight, Inc.**

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<p>3.1723. Nonpriority creditor's name and mailing address</p> <p>OAK'S AUTO/TRUCK SERVICE, LLC 1706 PITTSBURG STREET CHESWICK PA 15024</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,833.60</p>
<p>3.1724. Nonpriority creditor's name and mailing address</p> <p>OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST P.O. BOX 20127 CRANSTON RI 02920-0942</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,686.48</p>
<p>3.1725. Nonpriority creditor's name and mailing address</p> <p>OCEANIC LINKWAYS INC NEMF#00980 1300 LIVINGSTON AVE NORTH BRUNSWICK NJ 08902-3833</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$395.00</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1726. **Nonpriority creditor's name and mailing address**

OCEANIC LINKWAYS INC
1300 LIVINGSTON AVE
NORTH BRUNSWICK NJ 08902-3833

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$395.00

3.1727. **Nonpriority creditor's name and mailing address**

ODW LOGISTICS INC
CLAIMS DEPT
345 HIGH ST STE 600
HAMILTON OH 45011-6072

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$223.55

3.1728. **Nonpriority creditor's name and mailing address**

ODW LOGISTICS INC
SCOTT PURELL
345 HIGH ST STE 600
HAMILTON OH 45011-6072

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,105.92

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1729. Nonpriority creditor's name and mailing address</p> <p>ODW LOGISTICS INC ROBERT MAUPIN 345 HIGH ST STE 600 HAMILTON OH 45011-6072</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,348.20</p>
<p>3.1730. Nonpriority creditor's name and mailing address</p> <p>ODW LOGISTICS INC. BRIAN BANTEL 345 HIGH ST STE 600 HAMILTON OH 45011-6072</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$250.00</p>
<p>3.1731. Nonpriority creditor's name and mailing address</p> <p>ODYSSEY CTS 1915 VAUGHN RD KENNESAW GA 30144-4502</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$127.49</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1732. Nonpriority creditor's name and mailing address ODYSSEY / CTS CTS 1915 VAUGHN RD KENNESAW GA 30144-4502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$31.51
3.1733. Nonpriority creditor's name and mailing address ODYSSEY TRANSPORT,LLC C/O CTS 1915 VAUGHN RD KENNESAW GA 30144-4502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$459.55
3.1734. Nonpriority creditor's name and mailing address OFFICE EQUIPMENT SOURCE INC 227 W.WATER STREET ELMIRA NY 14901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$66.36

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1735. **Nonpriority creditor's name and mailing address**

OGORMAN*GILES
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1736. **Nonpriority creditor's name and mailing address**

OHANLON*KEITH J
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1737. **Nonpriority creditor's name and mailing address**

OHIO OVERNIGHT EXPRESS, LLC
3201 ALBERTA STREET
COLUMBUS OH 43204

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,561.25

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1738. **Nonpriority creditor's name and mailing address**

OHIO WORKERS COMPENSATION INSURANCE
P.O BOX 89492
CLEVELAND OH 44101-6492

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1739. **Nonpriority creditor's name and mailing address**

OHSERASE MANU LLC
AUTUMN CAJIGAS
PO BOX 550
HOGANSBURG NY 13655

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$111.50

3.1740. **Nonpriority creditor's name and mailing address**

OHSERASE MANUFACTURING LLC
BRITTANY SMYTHE
26 EAGLE DR
HOGANSBURG NY 13655

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1741. Nonpriority creditor's name and mailing address OHSERASE MANUFACTURING LLC CHRYSTAL NEVERETTE 26 EAGLE DR HOGANSBURG NY 13655 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$279.40
3.1742. Nonpriority creditor's name and mailing address OHSERASE MFG CHRYSTAL AP 26 EAGLE DRIVE HOGANSBURG NY 13655 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$288.59
3.1743. Nonpriority creditor's name and mailing address OLD MILL % UNISHIPPERS 2323 VICTORY AVE #1600 DALLAS TX 75219-7657 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$107.75

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1744. Nonpriority creditor's name and mailing address</p> <p>OMEGA SIGN & LIGHTING INC YESCO CHICAGO 100 WEST FAY AVE ADDISON IL 60101</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,487.85</p>
<p>3.1745. Nonpriority creditor's name and mailing address</p> <p>OMNI SERVICES, INC PO BOX 350016 BOSTON MA 02241-0516</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$144.68</p>
<p>3.1746. Nonpriority creditor's name and mailing address</p> <p>OMNITRACS LLC FILE NO 54210 LOS ANGELES CA 90074-4210</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$228.32</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1747. Nonpriority creditor's name and mailing address</p> <p>OMRON HEALTHCARE % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,890.56</p>
<p>3.1748. Nonpriority creditor's name and mailing address</p> <p>ONEIDA HEALTHCARE CENTER PO BOX 350 PLAINVIEW NY 11803</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$192.31</p>
<p>3.1749. Nonpriority creditor's name and mailing address</p> <p>ONEIDA MEDICAL IMAGING CTR. 321 GENESEE STREET ONEIDA NY 13421</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,125.30</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1750. Nonpriority creditor's name and mailing address ONEMAIN FINANCIAL GROUP LLC 600 BALTIMORE AVE SUITE 208 TOWSON MD 21204 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$124.18
3.1751. Nonpriority creditor's name and mailing address ONONDAGA COUNTY WATER AUTH PO BOX 4949 SYRACUSE NY 13221-4949 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$55.79
3.1752. Nonpriority creditor's name and mailing address ONYX SPECIALTY PAPER CARGO CLAIMS PO BOX 188 SOUTH LEE MA 01260-0188 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,861.25

Debtor **New England Motor Freight, Inc.**

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3.1753. **Nonpriority creditor's name and mailing address**

ORANGE AND ROCKLAND
390 WEST RT 59
SPRING VALLEY NY 10977

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1754. **Nonpriority creditor's name and mailing address**

ORANGE AND ROCKLAND UTILITIES INC
SAVO SCHALK GILLESPIE O'GRODNICK AND
FISHER
MICHAEL OGRODNICK ESQ
77 NORTH BRIDGE ST
SOMERVILLE NJ 08876

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1755. **Nonpriority creditor's name and mailing address**

ORLANDO PRODUCTS
DONNA TRIBULL
2639 MERCHANT DR
BALTIMORE MD 21230-3306

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$825.00

Debtor **New England Motor Freight, Inc.**

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3.1756. **Nonpriority creditor's name and mailing address**

ORSHAL*HOLLY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1757. **Nonpriority creditor's name and mailing address**

ORTIZ*GREG
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1758. **Nonpriority creditor's name and mailing address**

OSTROM ENTERPRISES, INC
2459 FALCONER-FREWSBURG ROAD
JAMESTOWN NY 14701

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,226.50

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1759. **Nonpriority creditor's name and mailing address**

OUTLAND*LANELOT
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1760. **Nonpriority creditor's name and mailing address**

OVERALL SUPPLY INC
823 EAST GATE DRIVE UNIT 2
MT LAUREL NJ 08054

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$228.44

3.1761. **Nonpriority creditor's name and mailing address**

OWEGO AUTO PARTS
P O BOX 106
OWEGO NY 13827

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$501.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1762. Nonpriority creditor's name and mailing address OWENS & SONS MARINE KIMBERLY FIELDS 3601 8TH AVE S SAINT PETERSBURG FL 33711-2203	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$596.36
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1763. Nonpriority creditor's name and mailing address OWENS*HAROLD Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1764. Nonpriority creditor's name and mailing address OWNES*HAROLD Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1765. **Nonpriority creditor's name and mailing address**

OYIBO*SYLVESTER
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1766. **Nonpriority creditor's name and mailing address**

P C X AEROSTRUCTURES
MARK KOZLOWSKI
300 FENN RD
NEWINGTON CT 06111-2277

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$97,918.77

3.1767. **Nonpriority creditor's name and mailing address**

P L S LOGISTICS SVCS
3120 UNIONVILLE RD
BLDG 110 SUITE 100
CRANBERRY TWP PA 16066-3437

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$73.00

Debtor **New England Motor Freight, Inc.**

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3.1768. Nonpriority creditor's name and mailing address P N G LOGISTICS MAURA AP 71773 P O BOX 123 AKRON PA 17501-0123 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$224.26
3.1769. Nonpriority creditor's name and mailing address PA DEP DIVISION OF STORAGE TANKS P.O. BOX 8762 HARRISBURG PA 17105-8762 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00
3.1770. Nonpriority creditor's name and mailing address PA DEP BUREAU OF CLEAN WATER ,CH92A PO BOX 8466 HARRISBURG PA 17105-8466 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$500.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1771. Nonpriority creditor's name and mailing address PABST % GEODIS 7101 EXECUTIVE CENTER DR STE 333 BRENTWOOD TN 37027-5236 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$271.57
3.1772. Nonpriority creditor's name and mailing address PACCAR PARTS SHARON CAMPBELL 3001 INDUSTRY DR LANCASTER PA 17603-4025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$388.93
3.1773. Nonpriority creditor's name and mailing address PACCAR PARTS FLEET SERVICES P O BOX 731165 DALLAS TX 75373-1165 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$16,175.70

Debtor **New England Motor Freight, Inc.**

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<p>3.1774. Nonpriority creditor's name and mailing address</p> <p>PACIFIC BEST INC BRAIN YU 10725 E RUSH ST SOUTH EL MONTE CA 91733-3433</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,771.55</p>
<p>3.1775. Nonpriority creditor's name and mailing address</p> <p>PACKAGING WHOLESALERS HEIDI NELSON 1717 GIFFORD RD ELGIN IL 60120-7534</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,664.20</p>
<p>3.1776. Nonpriority creditor's name and mailing address</p> <p>PACKAGING WHOLESALERS CARRIE POIDOMANI 1717 GIFFORD RD ELGIN IL 60120-7534</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$4,103.98</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1777. Nonpriority creditor's name and mailing address PACKAGING WHOLESALERS CARRIE POIDOMANI 1717 GIFFORD RD ELGIN IL 60120-7534 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$125.66
3.1778. Nonpriority creditor's name and mailing address PACTIV CORPORATION LISA MIGNON 1900 W FIELD CT LAKE FOREST IL 60045-4828 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,034.02
3.1779. Nonpriority creditor's name and mailing address PAETEC COMMUNICATIONS, INC WINDSTREAM PO BOX 9001013 LOUISVILLE KY 40290-1013 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$36,395.74

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1780. Nonpriority creditor's name and mailing address PAK SOLUTIONS RYAN MCCLAUGHLIN 16 PAGE HILL RD LANCASTER NH 03584-3618 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,869.00
3.1781. Nonpriority creditor's name and mailing address PALADONE ANGELA SHIPLEY 120 RESOURCE AVE MOUNTAIN LAKE PARK MD 21550-6973 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$105.00
3.1782. Nonpriority creditor's name and mailing address PALADONE PRODUCTS ANGELA KLINK 120 RESOURCE AVE MOUNTAIN LAKE PARK MD 21550-6973 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,970.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1783. Nonpriority creditor's name and mailing address PALM CASUAL ANGIE DICKHOUSE 3001 CHURCH ST MYRTLE BEACH SC 29577-5820 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,800.00
3.1784. Nonpriority creditor's name and mailing address PALMER*ADAM Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1785. Nonpriority creditor's name and mailing address PALMERTON AUTO PARTS 406 DELAWARE AVE. PALMERTON PA 18071 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$32,821.48

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1786. Nonpriority creditor's name and mailing address PALMERTON COMMUNITY AMBULANCE 501 DELAWARE AVE P O BOX 2 PALMERTON PA 18071 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$500.00
3.1787. Nonpriority creditor's name and mailing address PALMIERI*CHRISTOPHER Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1788. Nonpriority creditor's name and mailing address PANTOS USA INC A/R DEPT PO BOX 21174 NEW YORK NY 10087-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1789. Nonpriority creditor's name and mailing address PANTOS USA INC HYOJIN SEOL 910 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632-3306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$23,465.25
3.1790. Nonpriority creditor's name and mailing address PANTOS USA INC CHRISTIAN KIM 910 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632-3306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$54,305.25
3.1791. Nonpriority creditor's name and mailing address PANTOS USA INC HYOJIN SEOL 910 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632-3306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$327.94

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1792. Nonpriority creditor's name and mailing address PANTOS USA INC AR DEPT PO BOX 21174 NEW YORK NY 10087-1174 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$839.25
3.1793. Nonpriority creditor's name and mailing address PANTOS USA INCS CHRISTIAN KIM 910 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632-3306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$27,018.50
3.1794. Nonpriority creditor's name and mailing address PAPCO INC 4920 SOUTHERN BLVD VIRGINIA BEACH VA 23462 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,506.06

Debtor **New England Motor Freight, Inc.**

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3.1795. Nonpriority creditor's name and mailing address PAPERSMITHS 432 ELIZABETH AVE SOMERSET NJ 08873-1236	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$519.01
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.1796. Nonpriority creditor's name and mailing address PAPILLON AGRICULTURAL COMPANY 129 N WEST ST 2ND FLOOR EASTON MD 21601-2774	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$129.32
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1797. Nonpriority creditor's name and mailing address PARADIGM PLUMBING HEATING & AIR CONDITIONING INC 8 INDUSTRIAL PARK DR, UNIT #12 HOOKSETT NH 03106	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$712.74
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1798. Nonpriority creditor's name and mailing address PARAGON ENVIROMENTAL CONSTRUCTION INC 5664 MUD MILL ROAD BREWERTON NY 13029 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$702.00
3.1799. Nonpriority creditor's name and mailing address PARIS BUSINESS PRODCUTS DIANE HACKNEY 800 HIGHLAND DR WESTAMPTON NJ 08060-5109 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1800. Nonpriority creditor's name and mailing address PARKER HANNIFIN W & A953 884 9959 F 0218 3700 MAYFLOWER DR LYNCHBURG VA 24501-5023 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,320.80

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3.1801. Nonpriority creditor's name and mailing address PARKER LABORATORIES DIANA ST GEROGE 4 SPERRY RD FAIRFIELD NJ 07004-2016 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$40.12
3.1802. Nonpriority creditor's name and mailing address PARLUX FRAGRANCES DIANE DAWSON 35 SAWGRASS DR BELLPORT NY 11713-1575 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$644.89
3.1803. Nonpriority creditor's name and mailing address PARLUX LTD ALANNAH FRYER 35 SAWGRASS DR BELLPORT NY 11713-1575 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,690.00

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3.1804. Nonpriority creditor's name and mailing address PAROLVINI US CORP GIULIANO PAROLIN 74 LINWOOD AVE FAIRFIELD CT 06824-4911	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$202.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1805. Nonpriority creditor's name and mailing address PARTERSHIP FREIGHT SHANNON A/P 500 E LORAIN ST OBERLIN OH 44074-1238	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$17.08
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.1806. Nonpriority creditor's name and mailing address PASCALE SERVICE CORP 51 DELTA DR. PAWTUCKET RI 02860	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$8,707.31
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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<p>3.1807. Nonpriority creditor's name and mailing address</p> <p>PASSIAC METAL & BLDG TARA CRANE 1957 RUTGERS UNIVERSITY LAKEWOOD NJ 08701-4568</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$300.00</p>
<p>3.1808. Nonpriority creditor's name and mailing address</p> <p>PAUL C STECK, INC 25 BROWN AVE SPRINGFIELD NJ 07081</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$900.00</p>
<p>3.1809. Nonpriority creditor's name and mailing address</p> <p>PAUL KLEIN AND PAUL S SZUMEIDA 35 MULBERRY DR TUXEDO PARK NY 10987</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OPEN AUTO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

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3.1810. Nonpriority creditor's name and mailing address PAYLESS AUTO GLASS DEPT 105003 PO BOX 150432 HARTFORD CT 06115-0432 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,200.60
3.1811. Nonpriority creditor's name and mailing address PBI BRIAN HUBBARD 713 FENWAY AVE STE E CHESAPEAKE VA 23323-3333 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,190.05
3.1812. Nonpriority creditor's name and mailing address PBS BRAKE & SUPPLY CORP 6044 CORPORATE DRIVE EAST SYRACUSE NY 13057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$116.35

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<p>3.1813. Nonpriority creditor's name and mailing address</p> <p>PC SIGNS CAMPAIGN GRAPHICS EVA BARBER 2534 COMMERCE BLVD CINCINNATI OH 45241-1504</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$997.03</p>
<p>3.1814. Nonpriority creditor's name and mailing address</p> <p>PCG, INC C/O PAT GRANEY 412 TENNESSEE AVENUE CHARLESTON WV 25302</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$6,600.00</p>
<p>3.1815. Nonpriority creditor's name and mailing address</p> <p>PCM SALES, INC. BANK OF AMERICA-FILE 55327 2706 MEDIA CENTER DRIVE LOS ANGELES CA 90065</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$185.31</p>

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3.1816. **Nonpriority creditor's name and mailing address**

PDA, INC.
P.O. BOX 471909
FORT WORTH TX 76147

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$307.00

3.1817. **Nonpriority creditor's name and mailing address**

PDQ DOOR SALES
805 US HWY 50
MILFORD OH 45150

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$246.59

3.1818. **Nonpriority creditor's name and mailing address**

PEAKS*BRYAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

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<p>3.1819. Nonpriority creditor's name and mailing address</p> <p>PEARSON TRANS DEPT EVA GARCIA 221 RIVER STREET HOBOKEN NJ 07030-5989</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$12,464.91</p>
<p>3.1820. Nonpriority creditor's name and mailing address</p> <p>PEGASUS TRANSTECH CORPORATION ATTN: JONI JOHNSTON 4301 BOY SCOUT BLVD, STE 550 TAMPA FL 33607</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$22,896.83</p>
<p>3.1821. Nonpriority creditor's name and mailing address</p> <p>PELICAN PRODUCTS PEARL SHEETS 23215 EARLY AVE TORRANCE CA 90505-4002</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,028.28</p>

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3.1822. Nonpriority creditor's name and mailing address PENN JERSEY DIESEL & TRAILER 501 CAMBRIA AVE #400 BENSALEM PA 19020 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$683.79
3.1823. Nonpriority creditor's name and mailing address PENN POWER SYSTEMS 8330 STATE ROAD PHILADELPHIA PA 19136 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$402.10
3.1824. Nonpriority creditor's name and mailing address PENNINGTON SEED INC CILLIAMS & ASSOC 405 E 78TH STREET BLOOMINGTON MN 55420-1251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,533.76

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3.1825. Nonpriority creditor's name and mailing address PENNSYLVANIA AMERICAN WATER PO BOX 371412 PITTSBURGH PA 15250-7412	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$69.49
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1826. Nonpriority creditor's name and mailing address PENNSYLVANIA TPK COMMISSION PO BOX 67676 HARRISBURG PA 17106	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1827. Nonpriority creditor's name and mailing address PENNSYLVANIA TURNPIKE COMM. VIOLATION PROCESSING CENTER 300 EAST PARK DR HARRISBURG PA 17111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$887.90
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.1828. Nonpriority creditor's name and mailing address PENNWOOD PRODUCTS % NEXTERUS INC 802 FAR HILLS DRIVE NEW FREEDOM PA 17349-8428 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$569.48
3.1829. Nonpriority creditor's name and mailing address PENSKE TRUCK LEASING CO, LP P.O. BOX 802577 CHICAGO IL 60680-2577 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$180.75
3.1830. Nonpriority creditor's name and mailing address PENSKE TRUCK LEASING CO.,LP PO BOX 827380 PHILADELPHIA PA 19182-7380 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,602.35

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3.1831. Nonpriority creditor's name and mailing address PEPPERELL BRAIDING CO 22 LOWELL STREET PEPPERELL, MA 01463 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$49.78
3.1832. Nonpriority creditor's name and mailing address PEPSICO 108 WASHINGTON ST MANLIUS NY 13104-1913 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$3,498.23
3.1833. Nonpriority creditor's name and mailing address PEPSICO BEVERAGES & FOODS HG SUPKA PO BOX 4097 ORANGE CA 92863-4097 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,186.88

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3.1834. Nonpriority creditor's name and mailing address PEQUA INDUSTRIES HANK 431 BROOK AVENUE DEER PARK NY 11729-7222 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$212.95
3.1835. Nonpriority creditor's name and mailing address PERFORMANCE FREIGHT LIZ KENNOW 2040 W OKLAHOMA AVE MILWAUKEE WI 53215-4444 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,448.84
3.1836. Nonpriority creditor's name and mailing address PERFORMANCE FREIGHT JANINE OLSON 2040 W OKLAHOMA AVE MILWAUKEE WI 53215-4444 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,268.38

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3.1837. Nonpriority creditor's name and mailing address PERFORMANCE FREIGHT LIZ KENNOW 2040 W OKLAHOMA AVE MILWAUKEE WI 53215-4444 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$562.81
3.1838. Nonpriority creditor's name and mailing address PERFUME CENTER OF AMERICA CLAIMS DEPT 2020 OCEAN AVE UNIT B RONKONKOMA NY 11779-6536 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,276.50
3.1839. Nonpriority creditor's name and mailing address PERKINS PAPER CO MARY JO O'BRIEN 630 JOHN HANCOCK RD TAUNTON MA 02780-7380 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,940.12

Debtor **New England Motor Freight, Inc.**

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3.1840. **Nonpriority creditor's name and mailing address**

PERMA INC
605 SPRINGS RD
BEDFORD MA 01730

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1841. **Nonpriority creditor's name and mailing address**

PERRELLI*FRANK
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1842. **Nonpriority creditor's name and mailing address**

PERROTT*JOHN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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<p>3.1843. Nonpriority creditor's name and mailing address</p> <p>PET PRODUCTS CLAIMS DEPT/ PABLO DE JESUS STATE ROAD #1 KM.25 SAN JUAN PR 00926-9518</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$128.25</p>
<p>3.1844. Nonpriority creditor's name and mailing address</p> <p>PET PRODUCTS ASSOCIATES INC PABLO DE JESUS STATE ROAD #1 KM 25 SAN JUAN PR 00926-9635</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$136.86</p>
<p>3.1845. Nonpriority creditor's name and mailing address</p> <p>PETER BLUNT AND JOHN JAMES ATTORNEY FOR PLAINTIFF BLUNT TRANTOLO AND TRANTOLO LLC 50 RUSS ST HARTFORD CT 06106-1522</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>LITIGATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

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3.1846. **Nonpriority creditor's name and mailing address**

PETER BLUNT ET AL V
NEW ENGLAND MOTOR FREIGHT INC
PAUL SMITH
155 FERNWOOD DR
EAST LONGMEADOW MA 01028

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1847. **Nonpriority creditor's name and mailing address**

PETER DECORE
1824 ST CLAIR LN
HANOVER PARK IL 60133

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$63.25

3.1848. **Nonpriority creditor's name and mailing address**

PETERBILT OF CONNECTICUT, INC
DBA PETERBILT OF RHODE ISLAND
11 INDUSTRIAL LANE
JOHNSTON RI 02919

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$232.74

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1849. **Nonpriority creditor's name and mailing address**

PETERSON*BRIAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1850. **Nonpriority creditor's name and mailing address**

PETROLEUM PRODUCTS, LLC
P O BOX 644283
PITTSBURGH PA 15264-4283

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$24,729.17

3.1851. **Nonpriority creditor's name and mailing address**

PETROLEUM TRADERS CORPORATION
P O BOX 2357
FORT WAYNE IN 46801-2357

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$58,607.43

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1852. Nonpriority creditor's name and mailing address</p> <p>PHILIPS LIGHTING LEE ANN LACEY 1111 NORTSHORE DR STE P100A KNOXVILLE TN 37919-4005</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$21,764.44</p>
<p>3.1853. Nonpriority creditor's name and mailing address</p> <p>PHILIPS LIGHTING LEE ANN LACEY 1111 NORTSHORE DR, STE KNOXVILLE TN 37919-4005</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,378.12</p>
<p>3.1854. Nonpriority creditor's name and mailing address</p> <p>PHILIPS LIGHTING CO NA LEE ANN LACEY 1111 NORTSHORE DR, STE P100-A KNOXVILLE TN 37919-4005</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$33,581.17</p>

Debtor **New England Motor Freight, Inc.**

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<p>3.1855. Nonpriority creditor's name and mailing address</p> <p>PHILIPS LIGHTING COMPANY LEE ANN LACEY 1111 NORTSHORE DR SUITE P-100A KNOXVILLE TN 37919</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$4,929.41</p>
<p>3.1856. Nonpriority creditor's name and mailing address</p> <p>PICCA MCDONOUGH CLAIMS DEPT 1 NH AVE STE 125 PORTSMOUTH NH 03801-2907</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$7,616.00</p>
<p>3.1857. Nonpriority creditor's name and mailing address</p> <p>PILOT TRAVEL CENTERS, LLC 5508 LONAS DRIVE SUITE 260 KNOXVILLE TN 37909</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$20,122.94</p>

Debtor **New England Motor Freight, Inc.**

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<p>3.1858. Nonpriority creditor's name and mailing address</p> <p>PILUSO'S SERVICE 121 MOHAWK ST PO BOX 342 WHITESBORO NY 13492-0342</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$174.95</p>
<p>3.1859. Nonpriority creditor's name and mailing address</p> <p>PINNACLE FLEET SOLUTIONS P O BOX 742294 ATLANTA GA 30374-2294</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$202,565.42</p>
<p>3.1860. Nonpriority creditor's name and mailing address</p> <p>PINNACLE INTL FREIGHT BRIAN HAMILTON 2700 AVENGER DRIVE, SUITE 108 VIRGINIA BEACH VA 23452-7394</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$15,850.00</p>

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3.1861. Nonpriority creditor's name and mailing address PINNACLE TECHNOLOGY PARTNERS 83 MORSE STREET UNIT 6B NORWOOD MA 02062 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,340.00
3.1862. Nonpriority creditor's name and mailing address PINNACLE WORKFORCE LOG LLC 3086 MOMENTUM PLACE CHICAGO IL 60689-5330 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,072.63
3.1863. Nonpriority creditor's name and mailing address PIPELINE PACKAGING KEVIN JONES 27157 NETWORK PL CHICAGO IL 60673-1271 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,004.35

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3.1864. Nonpriority creditor's name and mailing address PITCO 300 ELM ST #1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$149.35
3.1865. Nonpriority creditor's name and mailing address PITCO FRIALATOR % TECH LOGISTICS 300 ELM ST UNIT 1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,173.35
3.1866. Nonpriority creditor's name and mailing address PITCO FRIALATOR, INC C/O TECH LOGISTICS 300 ELM STREET UNIT 1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,605.10

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3.1867. Nonpriority creditor's name and mailing address PLAINVIEW WATER DISTRICT PO BOX 9113 PLAINVIEW NY 11803-9013 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$800.00
3.1868. Nonpriority creditor's name and mailing address PLASTICS GROUP OF AMERICA SHELLEY MIGNEAULT 112 RIVER ST WOONSOCKET RI 02895-2928 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,528.34
3.1869. Nonpriority creditor's name and mailing address PLASTIRUN CORPORATION VERONICA ZAVALA 70 EMJAY BLVD BRENTWOOD NY 11717-3327 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.1870. Nonpriority creditor's name and mailing address PLIMPTON & HILLS LAKISHA MALAVE 300 RESEARCH PKWY MERIDEN CT 06450-7137 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,712.91
3.1871. Nonpriority creditor's name and mailing address PLS LOGISTICSCS SUZANNE DECREE 3120 UNIONVILLE RD CRANBERRY TWP PA 16066-3437 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,711.59
3.1872. Nonpriority creditor's name and mailing address PLUNSKE'S GARAGE 915 NORTH COLONY RD WALLINGFORD CT 06492 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,924.66

Debtor **New England Motor Freight, Inc.**

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3.1873. **Nonpriority creditor's name and mailing address**

PLYMOUTH RK A/S/O SURY FELIZ-CONTRRAS
POB 9112
BOSTON MA 02112-9112

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1874. **Nonpriority creditor's name and mailing address**

PLYMOUTH ROCK ASSURANCE CORP
CLAIMS DEPT
PO BOX 9112
BOSTON MA 02112

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1875. **Nonpriority creditor's name and mailing address**

PMXF SYSTEMS INC
183 27TH STREET
BROOKLYN NY 11232

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$6,614.19

Debtor **New England Motor Freight, Inc.**

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3.1876. Nonpriority creditor's name and mailing address PNGLC SHANNON BURNS PO BOX 123 AKRON PA 17501-0123 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$813.39
3.1877. Nonpriority creditor's name and mailing address POGROSKI*WAYNE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1878. Nonpriority creditor's name and mailing address POLISHED METALS LTD % SCHNEIDER LOGISTICS PO BOX 78158 MILWAUKEE WI 53278-8158 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,797.20

Debtor **New England Motor Freight, Inc.**

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3.1879. Nonpriority creditor's name and mailing address POLLAK DIST ABRAHAM JACOB ROSNER 1200 BABBIT RD EUCLID OH 44132 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$67.20
3.1880. Nonpriority creditor's name and mailing address POLYONE CORPORATION % SCHNEIDER LOGISTICS INC PO BOX 78158 MILWAUKEE WI 53278-8158 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,890.00
3.1881. Nonpriority creditor's name and mailing address POMP'S TIRE SERVICE, INC 1123 CEDAR STREET GREEN BAY WI 54301 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,135.95

Debtor **New England Motor Freight, Inc.**

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<p>3.1882. Nonpriority creditor's name and mailing address</p> <p>PORT AUTHORITY OF NY & NJ VIOLATIONS PROCESSING CENTER PO BOX 15186 ALBANY NY 12212-5186</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,268.00</p>
<p>3.1883. Nonpriority creditor's name and mailing address</p> <p>POSCO INC BILL FISKE JL 310 BALLARDVALE ST WILMINGTON MA 01887-1012</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$107.29</p>
<p>3.1884. Nonpriority creditor's name and mailing address</p> <p>POTPOURRI GROUP % TRANSPORTATION INSIGHT PO BOX 1227 PLYMOUTH MA 02362-1227</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

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3.1885. **Nonpriority creditor's name and mailing address**

POWER ELECTRIC I NICK
10-22 7TH ST
BELLEVILLE NJ 07109

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1886. **Nonpriority creditor's name and mailing address**

POWERCO, INC.
7247 PENN DR
ALLENTOWN PA 18106

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,393.76

3.1887. **Nonpriority creditor's name and mailing address**

PP&L
2 NORTH 9TH ST CPC-GENNI
ALLENTOWN PA 18101

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,905.13

Debtor **New England Motor Freight, Inc.**

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3.1888. Nonpriority creditor's name and mailing address PPG ARCHITECTURAL COATINGS MATT ROVNAN 400 BERTHA LAMME DR CRANBERRY TOWNSHIP PA 16066-5229 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$418.02
3.1889. Nonpriority creditor's name and mailing address PPG ARCHITECTURAL COATINGS MATT TESSARO 400 BERTHA LAMME DR CRANBERRY TOWNSHIP PA 16066-5229 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,788.06
3.1890. Nonpriority creditor's name and mailing address PPG ARCHITECTURAL COATINGS MATT TESSARO 400 BERTHA LAMME DR CRANBERRY TOWNSHIP PA 16066-5229 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,722.96

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1891. Nonpriority creditor's name and mailing address PRAXAIR DISTRIBUTION, INC P O BOX 382000 PITTSBURGH PA 15250-8000 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$765.03
3.1892. Nonpriority creditor's name and mailing address PRAXAIR DISTRIBUTION, INC PO BOX 120812 DEPT 0812 DALLAS TX 75312-0812 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$20.56
3.1893. Nonpriority creditor's name and mailing address PRECEPT MEDICAL DEBBIE HYATT 370 AIRPORT RD ARDEN NC 28704-9202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$126.00

Debtor **New England Motor Freight, Inc.**

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3.1894. Nonpriority creditor's name and mailing address PRECEPT MEDICAL PRODUCTS DEBBIE HYATT 370 AIRPORT ROAD ARDEN NC 28704-9202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00
3.1895. Nonpriority creditor's name and mailing address PRECISION DEVICES INCORPORATED 55 NORTH PLAINS INDUSTRIAL RD WALLINGFORD CT 06492 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,476.51
3.1896. Nonpriority creditor's name and mailing address PRED MATERIALS ALEXIS BEHNKE 60 E 42ND ST STE 1456 NEW YORK NY 10165 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$29.25

Debtor **New England Motor Freight, Inc.**

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3.1897. Nonpriority creditor's name and mailing address PREFERRED PLASTICS & PACKAGING SEAN BREITSTEIN 1099 WALL ST W STE 200 LYNDHURST NJ 07071-3678 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,058.64
3.1898. Nonpriority creditor's name and mailing address PREFERRED PLASTICS & PACKAGING JENNIFER SANTANA 1099 WALL ST W STE 200 LYNDHURST NJ 07071-3678 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,148.80
3.1899. Nonpriority creditor's name and mailing address PRESTOLITE ELECTRIC MICHELLE DAVENPORT 7585 EMPIRE DR FLORENCE KY 41042-2921 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,049.80

Debtor **New England Motor Freight, Inc.**

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3.1900. Nonpriority creditor's name and mailing address PRICE MASTER 57-07 31ST AVE WOODSIDE NY 11377	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$15.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1901. Nonpriority creditor's name and mailing address PRICE*MARK Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1902. Nonpriority creditor's name and mailing address PRIDE OF INDIA AKSHAT JAIN 329 SUMMIT AVE STE 7 BRIGHTON MA 02135-7532	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$650.36
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.1903. Nonpriority creditor's name and mailing address PRIDE OF INDIA AKSHAT JAIN 329 SUMMIT AVE STE 7 BRIGHTON MA 02135-7532 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$149.60
3.1904. Nonpriority creditor's name and mailing address PRIMARY COLORS D PATTERSON 9 MILLENNIUM DRIVE NO GRAFTON MA 01536-1862 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$231.00
3.1905. Nonpriority creditor's name and mailing address PRIMARY COLORS INC DANIELLE PATTERSON 9 MILLENNIUM DR NO GRAFTON MA 01536-1862 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$942.00

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<p>3.1906. Nonpriority creditor's name and mailing address</p> <p>PRINCE GEORGE TRUCK REPAIR, INC 4214 TAKACH ROAD PRINCE GEORGE VA 23875</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$15,629.06</p>
<p>3.1907. Nonpriority creditor's name and mailing address</p> <p>PRIORITY 1 INC RILEY ZINK PO BOX 398 NORTH LITTLE ROCK AR 72115-0398</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$648.74</p>
<p>3.1908. Nonpriority creditor's name and mailing address</p> <p>PRIORITY ONE, INC PO BOX 398 NORTH LITTLE ROCK AR 72115-0398</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$551.60</p>

Debtor **New England Motor Freight, Inc.**

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3.1909. Nonpriority creditor's name and mailing address PRIORITY1 P O BOX 398 N LITTLE ROCK AR 72115-0398 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,436.21
3.1910. Nonpriority creditor's name and mailing address PRIORITY1 P O BOX 398 NORTH LITTLE ROCK AR 72115-0398 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$51.00
3.1911. Nonpriority creditor's name and mailing address PRIVATE LABEL FOODS JAMES COLLINS 1686 LYELL AVE ROCHESTER NY 14606-2312 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,257.75

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3.1912. Nonpriority creditor's name and mailing address PRO AUDIO STU BUCHAN 14 EVERBERG RD WOBURN MA 01801-8506 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,141.00
3.1913. Nonpriority creditor's name and mailing address PRO SOURCE GLASS INTERNATIONAL RICHARD TANKEL PO BOX 996 ANDOVER MA 01810-0017 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$389.00
3.1914. Nonpriority creditor's name and mailing address PRO TEMP STAFFING LLC PO BOX 567 316 S MAIN ST CONCORD NH 03302 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,760.16

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3.1915. Nonpriority creditor's name and mailing address PROARANS INTERNATIONAL CARGO CLAIMS 8311 N PERIMETER RD INDIANAPOLIS IN 46241-3628 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,963.89
3.1916. Nonpriority creditor's name and mailing address PROBAKE INC KATHY BOYKO 2057 E AURORA RD TWINSBURG OH 44087-1938 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,511.65
3.1917. Nonpriority creditor's name and mailing address PROCTER & GAMBLE % RYDER 13599 PARK VISTA BLVD BOX 38 FORT WORTH TX 76177-3237 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,467.49

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<p>3.1918. Nonpriority creditor's name and mailing address PRODRIVERS PO BOX 102409 ATLANTA GA 30368-2409</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,994.17</p>
<p>3.1919. Nonpriority creditor's name and mailing address PRODUCERS PEANUT CO SANDY YOUNG 337 MOORE AVE SUFFOLK VA 23434-3819</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$31.56</p>
<p>3.1920. Nonpriority creditor's name and mailing address PROFESSIONAL FREIGHT SOLUTIONS JANICE FAROUGH 6303 26 MILE RD WASHINGTON TOWNSHIP MI 48094-3825</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: CARGO CLAIMS</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,175.00</p>

Debtor **New England Motor Freight, Inc.**

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3.1921. **Nonpriority creditor's name and mailing address**

PROFESSIONAL INSURANCE CONCEPTS
DONNA GRIFFITH
105 EISENHOWER PKWY
4TH FLOOR
ROSELAND NJ 07068

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1922. **Nonpriority creditor's name and mailing address**

PROFIX
PROFESSIONAL TRAILER REPAIR IN
51 EVERGREEN ST
BAYONNE NJ 07002

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$31,711.04

3.1923. **Nonpriority creditor's name and mailing address**

PROFORMANCE FOODS
EMILIE DOMER
44 DOBBIN ST GROUND FL
BROOKLYN NY 11222-3110

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$259.20

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1924. **Nonpriority creditor's name and mailing address**

PROGRESSIVE A/S/O SELIMAJ MUJO
2344 NETWORK PL
CHICAGO IL 60673-1243

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1925. **Nonpriority creditor's name and mailing address**

PROGRESSIVE A/S/O TONY J HOBSON
24344 NETWORK PL
CHICAGO IL 60673-1243

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1926. **Nonpriority creditor's name and mailing address**

PROMPT LOGISTICS
TRESAN BLAKE
212 2ND ST STE 205A
LAKEWOOD NJ 08701-3683

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$852.80

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1927. **Nonpriority creditor's name and mailing address**

PROTECTIVE INSURANCE CO.
CARL MALM/JERRY CRAIG
111 CONGRESSIONAL BLVD.
SUITE 500
CARMEL IN 46032

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1928. **Nonpriority creditor's name and mailing address**

PROTRANS INTERNATIONAL
CLAIMS DEPT
8311 N PERIMETER RD
INDIANAPOLIS IN 46241-3628

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1929. **Nonpriority creditor's name and mailing address**

PROTRANS INTERNATIONAL
CARGO CLAIMS
8311 N PERIMETER RD
INDIANAPOLIS IN 46241-3628

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,280.56

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1930. Nonpriority creditor's name and mailing address PROTRANS INTERNATIONAL BOBBI MARTIN 8311 N PERIMETER RD INDIANAPOLIS IN 46241-3628	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$9,400.44
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1931. Nonpriority creditor's name and mailing address PROTRANS INTERNATIONAL, INC BOBBI MARTIN 8311 NO PERIMETER RD INDIANAPOLIS IN 46241-3628	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,950.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1932. Nonpriority creditor's name and mailing address PROVINCE*CHESTER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1933. Nonpriority creditor's name and mailing address PSEGLI PO BOX 9039 HICKSVILLE NY 11802-0888 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,208.21
3.1934. Nonpriority creditor's name and mailing address PUBLIC SERVICE ELECTRIC AND GAS COMPANY PO BOX 14444 NEW BRUNSWICK NJ 08906-4444 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$707.30
3.1935. Nonpriority creditor's name and mailing address PUERTO RICO BIOMEDICAL CORPORATION LORNA AVILES PO BOX 4755 CAROLINA PR 00984-4755 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$752.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1936. Nonpriority creditor's name and mailing address PUERTO RICO BIOMEDICAL CORPORATION GERMAN PADRO IRIZARRY PO BOX 4755 CAROLINA PR 00984-4755 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,920.00
3.1937. Nonpriority creditor's name and mailing address PULPDENT CORPORATION ALLISON MILLIAN 80 OAKLAND ST WATERTOWN MA 02472-2202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,079.20
3.1938. Nonpriority creditor's name and mailing address PURRINGTON*TAYLOR Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1939. Nonpriority creditor's name and mailing address QUALITY AUTO GLASS, INC 2300 SOUTH CLINTON AVENUE SOUTH PLAINFIELD NJ 07080 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$783.85
3.1940. Nonpriority creditor's name and mailing address QUALITY COLLISION & PAINT INC 79 EAST 26TH ST PATERSON NJ 07501 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,798.13
3.1941. Nonpriority creditor's name and mailing address QUALITY PRESSURE WASHING CORP P O BOX 288 OAK LAWN IL 60454 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,503.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1942. Nonpriority creditor's name and mailing address QUESTECH CORPORATION CHRISTEN FITZGERALD 92 PARK ST RUTLAND VT 05701-5079 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,949.20
3.1943. Nonpriority creditor's name and mailing address QUICK FUEL FLYERS ENERGY LLC DEPT 34516 , PO BOX 39000 SAN FRANCISCO CA 94139-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$47,434.80
3.1944. Nonpriority creditor's name and mailing address QUICK LOGISTICS RMC DONALD@GLTMS.COM P O BOX 2850 NORTHLAKE IL 60164-7850 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$32.15

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1945. Nonpriority creditor's name and mailing address QUICK TRANSFER INC RIVKY SCHWARTZ 331 RUTLEDGE ST BROOKLYN NY 11211-7547 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$272.45
3.1946. Nonpriority creditor's name and mailing address QUICK TRANSFER INC MIMI KARMELE P O BOX 110526 BROOKLYN NY 11211-0526 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$41.55
3.1947. Nonpriority creditor's name and mailing address QUICK TRANSFER INC RIVKY SCHWARTZ 331 RUTLEDGE ST BROOKLYN NY 11211-7547 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$82.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1948. **Nonpriority creditor's name and mailing address**

QUILLINAN*MIKE
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1949. **Nonpriority creditor's name and mailing address**

QUINCY MUTUAL ASO ANDREW W DACY
57 WASHINGTON ST
QUINCY MA 02169

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1950. **Nonpriority creditor's name and mailing address**

R BROOKS MECHANICAL, INC
PO BOX 1090
RISING SUN MD 21911

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,326.48

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.1951. Nonpriority creditor's name and mailing address R R DONNELLEY 1000 WINDHAM PKWY BOLINGBROOK IL 60490-3507</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$773.23</p>
<p>3.1952. Nonpriority creditor's name and mailing address R3 CHICAGO MIKE HERRERA 2301 LUNT AVE ELK GROVE VILLAGE IL 60007-5625</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$114.76</p>
<p>3.1953. Nonpriority creditor's name and mailing address RADIANT POOLS MARILYN SIRCO 440 N PEARL ST ALBANY NY 12207-1320</p> <p>Date or dates debt was incurred VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$2,140.93</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1954. Nonpriority creditor's name and mailing address RADIANT POOLS ANTHONY SIRCO 440 N PEARL STREET ALBANY NY 12207-1320 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$100.86
3.1955. Nonpriority creditor's name and mailing address RADICI PLASTICS RANDY STEELE 960 SEVILLE RD WADSWORTH OH 44281-8316 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,325.00
3.1956. Nonpriority creditor's name and mailing address RADIO SYSTEMS CORPORATION % GEODIS PO BOX 2208 BRENTWOOD TN 37024-2208 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,081.97

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1957. **Nonpriority creditor's name and mailing address**

RAFFERTY*FRED
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1958. **Nonpriority creditor's name and mailing address**

RAILSIDE ENVIRONMENTAL
SERVICES LLC
1 DEXTER RD
EAST PROVIDENCE RI 02914

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,351.80

3.1959. **Nonpriority creditor's name and mailing address**

RAJENDRANAATH DATARAM ET AL
ALVIN H BROOME AND ASSOCIATES PC
225 BROADWAY
STE 630
NEW YORK NY 10007

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

DISMISSED LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1960. **Nonpriority creditor's name and mailing address**

RAJENDRANAUTH DATARAM ET AL
ARMSTRONG FLOORING
GIBBONS PC DALE BARNEY ESQ
ONE GATEWAY CENTER
21ST FLOOR
NEWARK NJ 07102

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

DISMISSED LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1961. **Nonpriority creditor's name and mailing address**

RANDSTAD US, LP
P O BOX 7247-6655
PHILADELPHIA PA 19170-6655

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,256.82

3.1962. **Nonpriority creditor's name and mailing address**

RANDY MERRIT
ATTORNEY FOR THE PLAINTIFF
LAW OFFICES OF GOFFER AND CIMINI
MICHAEL GOFFER ESQUIRE
1603 MONSEY AVE
SCRANTON PA 18509

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1963. **Nonpriority creditor's name and mailing address**

RANDY MERRIT V. NEMF ET AL.
ATTORNEY FOR THE DEFENDANT
SWARTZ CAMPBELL LLC KEVIN CANAVAN
TWO LIBERTY PL
50 S 16TH ST FL 28
PHILADELPHIA PA 19102

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1964. **Nonpriority creditor's name and mailing address**

RAPACHE*GARY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.1965. **Nonpriority creditor's name and mailing address**

RATERMANN MANUFACTURING INC
% WORLDWIDE EXPRESS
2323 VICTORY AVE STE 1600
DALLAS TX 75219-7657

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,079.71

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1966. Nonpriority creditor's name and mailing address RAY KERHAERT'S GARAGE INC. 1396 RIDGE ROAD W. ROCHESTER NY 14615-2418 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,417.00
3.1967. Nonpriority creditor's name and mailing address RAYMOND CORP JOHN SPONABLE PO BOX 130 GREENE NY 13778-0130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,729.49
3.1968. Nonpriority creditor's name and mailing address RAYMOND HADLEY CORP LYNNE HICKEY 89 TOMPKINS ST SPENCER NY 14883-9759 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$316.50

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1969. Nonpriority creditor's name and mailing address RAYMOND OF NEW JERSEY, LLC 1000 BRIGHTON STREET UNION NJ 07083	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$3,740.04
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1970. Nonpriority creditor's name and mailing address RAYMOND*CARROLL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.1971. Nonpriority creditor's name and mailing address RAYS TRUCK SERVICES 305 BRADLEY STREET SACO ME 04072	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,200.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.1972. Nonpriority creditor's name and mailing address RE PRESCOTT CO INC RALPH 10 RAILROAD AVE EXETER NH 03833-2037 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,628.01
3.1973. Nonpriority creditor's name and mailing address RECON LOGISTICS 284 INVERNESS PKWY STE 270 ENGLEWOOD CO 80112-5821 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$30.57
3.1974. Nonpriority creditor's name and mailing address RED BULL NORTH AMERICA % GEODIS PO BOX 2208 BRENTWOOD TN 37024-2208 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.1975. Nonpriority creditor's name and mailing address RED HAWK FIRE & SECURITY, LLC PO BOX 970071 BOSTON MA 02297-0071 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$880.00
3.1976. Nonpriority creditor's name and mailing address REDCO FOODS DIST CTR 300 ELM ST #1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$817.54
3.1977. Nonpriority creditor's name and mailing address REDCO FOODS INC MARYANNE & EXT 555 ONE HANSEN ISLAND LITTLE FALLS NY 13365-1997 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$52.90

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3.1978. Nonpriority creditor's name and mailing address REDCO FOODS INC MARYANNE & EXT 555 ONE HANSEN ISLAND LITTLE FALLS NY 13365-1997 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$4.39
3.1979. Nonpriority creditor's name and mailing address REDCO FOODS INC C/O TECH LOGISTICS 300 ELM ST UNIT 1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$57.29
3.1980. Nonpriority creditor's name and mailing address REED LANE % LOGISTXS INC 1500 ROUTE 17 STE 305 HACKETTSTOWN NJ 07840 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.1981. Nonpriority creditor's name and mailing address REGIONAL INTERNATIONAL CORP. 1007 LEHIGH STATION RD HENRIETTA NY 14467 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7.95
3.1982. Nonpriority creditor's name and mailing address REI MEL FLORIO 2200 BERGEN TOWN CTR PARAMUS NJ 07652-5025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$660.00
3.1983. Nonpriority creditor's name and mailing address REI JOHN WEBB 6750 S 228TH ST KENT WA 98032-4803 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$687.93

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<p>3.1984. Nonpriority creditor's name and mailing address</p> <p>REI 002 MELISSA FLORIO 2200 BERGEN TOWN CTR PARAMUS NJ 07652-5025</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,199.45</p>
<p>3.1985. Nonpriority creditor's name and mailing address</p> <p>REI 0057 ISAAC SWANSON 375 COCHITUATE RD FRAMINGHAM MA 01701</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$371.48</p>
<p>3.1986. Nonpriority creditor's name and mailing address</p> <p>REI 101 SAMUEL RENDON 412 S 27TH ST PITTSBURGH PA 15203-2365</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$933.32</p>

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3.1987. Nonpriority creditor's name and mailing address REI 102 % TRANSPORTATION INSIGHT 310 MAIN AVE WAY SE HICKORY NC 28602-3513 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$53,446.00
3.1988. Nonpriority creditor's name and mailing address REI 140 MELISSA FLORIO 2200 BERGEN TOWN CENTER PARAMUS NJ 07652-5025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,357.94
3.1989. Nonpriority creditor's name and mailing address REI 166 GREG HOWELL 350 INDEPENDENCE BLVD VIRGINIA BEACH VA 23462-2802 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$592.00

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3.1990. Nonpriority creditor's name and mailing address REI 171 RYAN SHEPARD 450 E HENRIETTA RD ROCHESTER NY 14620-4630 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$878.73
3.1991. Nonpriority creditor's name and mailing address REINFORCED PLASTICS LAB CRAIG VERNON 236 ROUTE 109 FARMINGDALE NY 11735-1503 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,104.40
3.1992. Nonpriority creditor's name and mailing address RELIABLE MATERIAL HANDLING INSTALLATION LLC 286 LESWIG DR BRICK NJ 08723 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,469.00

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3.1993. Nonpriority creditor's name and mailing address REMA FOODS ANTHONY MONTUORIE DB 140 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632-2514 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1994. Nonpriority creditor's name and mailing address REMA FOODS ANTHONY MONTUORI 140 SYLVAN AVE ENGLEWOOD CLIFFS NJ 07632-2514 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,129.52
3.1995. Nonpriority creditor's name and mailing address RENEE HARTSON SPADAFORA AND VERRASTRO LLP KATHY VERRASTRO 2 SYMPHONY CIR BUFFALO NY 14201 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.1996. Nonpriority creditor's name and mailing address RENEE HARTSON V NEW ENGLAND MOTOR FREIGHT INC ET AL FRANCISCO GOMEZ-BUENO 179 VERMONT AVE PROVIDENCE RI 02905 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.1997. Nonpriority creditor's name and mailing address REPPEN INDUSTRIES, INC 5 MALKE DRIVE OCEAN NJ 07712 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,628.75
3.1998. Nonpriority creditor's name and mailing address REPUBLIC TOBACCO MARTIN TRUJILLO 2301 RAVINE WAY GLENVIEW IL 60025-7627 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,092.60

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3.1999. Nonpriority creditor's name and mailing address RESILITE SPORTS PRODUCT INC WILLIAM HELLER 200 POINT TOWNSHIP DR NORTHUMBERLAND PA 17857-8701 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$600.00
3.2000. Nonpriority creditor's name and mailing address REVERIE % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2001. Nonpriority creditor's name and mailing address REXEL ENERGY SOLUTIONS KRISTINE CODEGA 350 MYLES STANDISH BLVD STE 204 TAUNTON MA 02780-7387 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$632.31

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3.2002. Nonpriority creditor's name and mailing address RG&E PO BOX 847813 BOSTON MA 02284-7813	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,983.83
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2003. Nonpriority creditor's name and mailing address RHEEL*THOMAS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2004. Nonpriority creditor's name and mailing address RHEUDINE HARRIS GOLDENBERG MACKLER SAYEGH MINTZ ET AL ALLISON E WEINER ESQ 1030 ATLANTIC AVE ATLANTIC CITY NJ 08401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2005. Nonpriority creditor's name and mailing address RHOADS*CHRISTOPER Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2006. Nonpriority creditor's name and mailing address RHODE ISLAND NOVELTY JONATHAN DUGUAY 350 COMMERCE DR FALL RIVER MA 02720-4746 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,700.00
3.2007. Nonpriority creditor's name and mailing address RHODE ISLAND NOVELTY ED KUGA MANAGER AP P O BOX 9278 FALL RIVER MA 02720-0005 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,084.49

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3.2008. Nonpriority creditor's name and mailing address RICH ART COLOR CO SUSAN DAVIS 202 PEGASUS AVE NORTHVALE NJ 07647-1904	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,350.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2009. Nonpriority creditor's name and mailing address RICHARD BRYAN HILL ET AL V. CHESTER PIKE AUTOSALES, INC. ET AL. ATTORNEY FOR THE DEFENDANT SWARTZ CAMPBELL LLC KEVIN CANAVAN TWO LIBERTY PL 50 S 16TH ST FL 28 PHILADELPHIA PA 19102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2010. Nonpriority creditor's name and mailing address RICHARD BRYAN HILL ET AL. EISENBERG ROTHWEILER WINKLER, EISENBERG & JECK,P.C. FREDRIC S EISENBERG 1634 SPRUCE STREET PHILADELPHIA PA 19103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2011. **Nonpriority creditor's name and mailing address**

RICHARD MILERSON
DOMINICK W LAVELLE ESQ
100 HERRICKS RD
STE 201
MINEOLA NY 11501

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2012. **Nonpriority creditor's name and mailing address**

RICHARDSON BRANDS
NICKIE ORENDORFF
101 ERIE BLVD
CANAJOHARIE NY 13317-1148

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$504.00

3.2013. **Nonpriority creditor's name and mailing address**

RICHARDSON BRANDS
TAMMY CROMIE
101 ERIE BLVD
CANAJOHARIE NY 13317-1148

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$891.00

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3.2014. Nonpriority creditor's name and mailing address RICHMOND TOWING, INC 9932 JEFFERSON DAVIS HWY RICHMOND VA 23237	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,005.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2015. Nonpriority creditor's name and mailing address RICOH USA INC % TRANSPORTATION INSIGHT 310 MAIN AVE WAY SE HICKORY NC 28602-3513	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$8,217.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2016. Nonpriority creditor's name and mailing address RICOH USA INC C/O TRANSPORTATION INSIGHT 310 MAIN AVE WAY SE HICKORY NC 28602-3513	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,579.12
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2017. Nonpriority creditor's name and mailing address RICOH USA, INC P O BOX 827577 PHILADELPHIA PA 19182-7577	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$105.43
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2018. Nonpriority creditor's name and mailing address RIDDLE*CAROL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2019. Nonpriority creditor's name and mailing address RIDOT P O BOX 576 JAMESTOWN RI 02835	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$54.94
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2020. Nonpriority creditor's name and mailing address RIGGINS, INC P O BOX 150 MILVILLE NJ 08332	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$55,625.13
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2021. Nonpriority creditor's name and mailing address RILEY*STEPHAN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2022. Nonpriority creditor's name and mailing address RITA ALVARADO THE ROSATO FIRM PAUL A MARBER ESQ 55 BROADWAY 23RD FLOOR NEW YORK NY 10006	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2023. Nonpriority creditor's name and mailing address RITE AID CORP LOCK BOX 4252 PO BOX 8500 PHILADELPHIA PA 19178-4252 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,041.75
3.2024. Nonpriority creditor's name and mailing address RITE AID CORPORATION MAJORIE HIER 30 HUNTER LANE CAMP HILL PA 17011-2400 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$154.08
3.2025. Nonpriority creditor's name and mailing address RITE AID LIVERPOOL D MAUREEN KICK 7245 HENRY CLAY BLVD LIVERPOOL NY 13088-3523 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,450.08

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3.2026. **Nonpriority creditor's name and mailing address**

RIVERSIDE REALTY
POB 4436
BALTIMORE MD 21223

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2027. **Nonpriority creditor's name and mailing address**

RIVIANA FOODS
85 SHANNON RD
HARRISBURG PA 17112-2799

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$1,133.59

3.2028. **Nonpriority creditor's name and mailing address**

RIVIANA FOODS
% T C S
PO BOX 18
DILLSBURG PA 17019-0018

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,133.59

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3.2029. Nonpriority creditor's name and mailing address RJ SCHINNER JORDAN SLUTTER 2120 SPILLMAN DR BETHLEHEM PA 18015	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$3,028.76
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2030. Nonpriority creditor's name and mailing address RLI INSURANCE CO 9025 N LINDBERGH DR PEORIA IL 61615	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: TRADE PAYABLES - INSURANCE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2031. Nonpriority creditor's name and mailing address ROADNET TECHNOLOGIES, INC PO BOX 840720 DALLAS TX 75284-0720	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$18,425.66
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2032. Nonpriority creditor's name and mailing address ROADRUNNER ENTERPRISES, LLC 21 E 6TH ST, APT 1B CLIFTON NJ 07011	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,730.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2033. Nonpriority creditor's name and mailing address ROANOKE CLAIMS SERVICES MELODY DWYER 1475 E WOODFIELD RD STE 500 SCHAUMBURG IL 60173-4980	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$935.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2034. Nonpriority creditor's name and mailing address ROARING SPRING BLANK TY HINSON 235 APPLE PACKERS RD MARTINSBURG PA 16662-1618	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$3,816.70
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2035. Nonpriority creditor's name and mailing address ROARING SPRING BLANK BOOK SUSAN KOLINCHAK PO BOX 35 ROARING SPRING PA 16673-0035 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,801.53
3.2036. Nonpriority creditor's name and mailing address ROBERT FISCHER SERVICES, INC 2050 FLETCHER COVE HUMMELSTOWN PA 17036-8994 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$449.33
3.2037. Nonpriority creditor's name and mailing address ROBERT STEELE 14445 WISPERWOOD CT DUMFRIES VA 22025 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.2038. Nonpriority creditor's name and mailing address ROBERTS & SON INC 20 JEWELL STREET GARFIELD NJ 07026	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,550.02
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2039. Nonpriority creditor's name and mailing address ROBERTS LOGISTICS MICHELLE BRICKER 5501 RT 89 NORTH EAST PA 16428-5054	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$541.09
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2040. Nonpriority creditor's name and mailing address ROBERTS TOWING & RECOVERY 722 SOUTH PEARL STREET ALBANY NY 12202	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,500.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2041. Nonpriority creditor's name and mailing address ROB'S AUTOMOTIVE & COLLISION P.O. BOX 1619 LEVITTOWN PA 19058-1619 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,513.02
3.2042. Nonpriority creditor's name and mailing address ROCHESTER FIRE EQUIPMENT, INC. 64 MARSHALL ST ROCHESTER NY 14607 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$38.23
3.2043. Nonpriority creditor's name and mailing address ROCHESTER MIDLAND NTRAF BARB TRUNGORJON 151 JOHN JAMES AUDUBON BLVD AMHERST NY 14228-1111 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$231.82

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3.2044. Nonpriority creditor's name and mailing address ROCHESTER TRUCK REPAIR 549 U S HIGHWAY 1 BYPASS PORTSMOUTH NH 03801-4131 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$367.50
3.2045. Nonpriority creditor's name and mailing address ROCHLING GLASTIC COMPOSITES BILL DAVIS 4321 GLENRIDGE RD CLEVELAND OH 44121-2805 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$613.27
3.2046. Nonpriority creditor's name and mailing address ROCKWELL AMERICAN JAMIE FORSYTHE 170 COMMERCE DR NEW HOLLAND PA 17557-9115 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$956.68

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3.2047. **Nonpriority creditor's name and mailing address**

ROCKWELL EQUIPMENT & SUPPLY
DINO PICCILINO
216 4TH ST
WILMERDING PA 15148-1004

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$65.00

3.2048. **Nonpriority creditor's name and mailing address**

ROCKY MOUNTAIN DATA SERVICES
PO BOX 5746
DENVER CO 80217

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$157.50

3.2049. **Nonpriority creditor's name and mailing address**

RODRIGUEZ*DAVID
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

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3.2050. Nonpriority creditor's name and mailing address ROETZEL 222 S. MAIN STREET AKRON OH 44308	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,483.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2051. Nonpriority creditor's name and mailing address ROHLIG USA 1601 ESTES AVE ELK GROVE VILLAGE IL 60007-5409	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,374.77
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2052. Nonpriority creditor's name and mailing address ROLAND FOODS LLC % PENSKE LOGISTICS CLAIMS DEPARTMENT 211 HILLTOP RD SAINT JOSEPH MI 49085-2300	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$7,760.14
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2053. Nonpriority creditor's name and mailing address ROLI RETREADS INC 1002 ROUTE 109 FARMINGDALE NY 11735	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,127.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2054. Nonpriority creditor's name and mailing address ROMBERGER*DAVID Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2055. Nonpriority creditor's name and mailing address ROMON ROMERO-REYES HARMON LINDER AND ROGOWSKY MARK J LINDER ESQ 3 PARK AVE 23RD FLOOR SUITE 2300 NEW YORK NY 10016	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2056. **Nonpriority creditor's name and mailing address**

ROSA MORA REYNA
ATTORNEY FOR THE PLAINTIFF
GANIM LEGAL PC
2370 PARK AVE
BRIDGEPORT CT 06604

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2057. **Nonpriority creditor's name and mailing address**

ROSA MORA REYNA V
NEW ENGLAND MOTOR FREIGHT INC ET AL
ALDEN DONALDSON
67 BEECHWOOD AVE
MT. VERNON NY 10553

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2058. **Nonpriority creditor's name and mailing address**

ROSA MORA REYNA V
NEW ENGLAND MOTOR FREIGHT INC ET AL
SOLIMENE & SECONDO, LLP, ELYCIA D.
SOLIMENE
1501 EAST MAIN STREET
SUITE 204
MERIDEN CT 06450

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

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3.2059. **Nonpriority creditor's name and mailing address**

ROSA PERALTA V
NEW ENGLAND MOTOR FREIGHT INC ET AL
DERRICK ROBERTS
254 SOUTH MAIN ST
SEABROOK NH 03874

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2060. **Nonpriority creditor's name and mailing address**

ROSENBACH CONTEMPORARY
C/O PROMPT LOGISTICS-AVI
212 SECOND ST 205A
LAKEWOOD NJ 08701-3683

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$250.00

3.2061. **Nonpriority creditor's name and mailing address**

ROTO-ROOTER
PO BOX 8873
FORT WAYNE IN 46898

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,347.45

Debtor **New England Motor Freight, Inc.**

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3.2062. **Nonpriority creditor's name and mailing address**

ROY AUBLE AND NEMF
WARD GREENBERG HELLER AND REIDY LLP
SCOTT JEANNETTE ESQ
1800 BAUSCH & LOMB PL
ROCHESTER NY 14604

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2063. **Nonpriority creditor's name and mailing address**

ROYAL INDUSTRIES
JOHN NOVOTNY
4100 W VICTORIA ST
CHICAGO IL 60646-6727

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$268.16

3.2064. **Nonpriority creditor's name and mailing address**

ROYAL INDUSTRIES
LILIA A/P
4100 W VICTORIA ST
CHICAGO IL 60646-6727

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$162.40

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3.2065. Nonpriority creditor's name and mailing address RPC DRIVELINE & AUTO SUPPLY 7929 RIVER RD PENNSAUKEN NJ 08110 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$208.31
3.2066. Nonpriority creditor's name and mailing address RR DONNELLEY LOGISTICS DINA MULCAHY 1000 WINDHAM PKWY BOLINGBROOK IL 60490-3507 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$28,443.03
3.2067. Nonpriority creditor's name and mailing address RTS PACKAGING RICHARD ARNOTT 16 WASHINGTON AVE SCARBOROUGH ME 04074-8311 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,342.32

Debtor **New England Motor Freight, Inc.**

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3.2068. Nonpriority creditor's name and mailing address RUBBERMAID COMMERCIAL PROD SHERRY SINGHAS 3124 VALLEY AVENUE WINCHESTER VA 22601-2636 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$481.83
3.2069. Nonpriority creditor's name and mailing address RUBBERMAID COMMERCIAL PRODUCTS SHERRY SINGHAS 3124 VALLEY AVE WINCHESTER VA 22601-2636 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,014.60
3.2070. Nonpriority creditor's name and mailing address RUDELITCH*MICHAEL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2071. Nonpriority creditor's name and mailing address RUGER LLC AMIR FRYDMAN 4207 BRADLEY LA CHEVY CHASE MD 20815-5234 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,649.22
3.2072. Nonpriority creditor's name and mailing address RUSH TRUCK CENTERS 4655 S CENTRAL AVE CHICAGO IL 60638 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$309.48
3.2073. Nonpriority creditor's name and mailing address RUSH TRUCK CENTERS OF OHIO,INC PO BOX 34630 SAN ANTONIO TX 78265 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,691.06

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3.2074. **Nonpriority creditor's name and mailing address**

RUSTY'S TOWING SERVICE, INC
4845 OBETZ-REESE ROAD
COLUMBUS OH 43207

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,240.00

3.2075. **Nonpriority creditor's name and mailing address**

RUTAN POLY INDUSTRIES
JOY FERRACANE
39 SIDING PL
MAHWAH NJ 07430-1828

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$10,920.00

3.2076. **Nonpriority creditor's name and mailing address**

RYAN*KEITH
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2077. Nonpriority creditor's name and mailing address RYDER DOMTAR CLAIMS NORMA LOCKLEAR 13599 PARK VISTA BLVD BOX 38 FORT WORTH TX 76177-3237 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,138.00
3.2078. Nonpriority creditor's name and mailing address RYDER EXXONMOBIL SUMAIR AHMED 580 WESTLAKE PARK BLVD STE 950 HOUSTON TX 77079-2662 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,162.14
3.2079. Nonpriority creditor's name and mailing address RYDER HP CLAIMS DEPT 13599 PARK VISTA BLVD BOX 38 FORT WORTH TX 76177-3237 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,997.91

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3.2080. Nonpriority creditor's name and mailing address RYDER SHARED SERVICE CENTER 6000 WINDWARD PARKWAY ALPHARETTA GA 30005 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$583.59
3.2081. Nonpriority creditor's name and mailing address RYDER TRANSPORTATION INC PO BOX 96723 CHICAGO IL 60693-6723 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,371.08
3.2082. Nonpriority creditor's name and mailing address RYDER TRUCK RENTAL PO BOX 96723 CHICAGO IL 60693-6723 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,072.28

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3.2083. Nonpriority creditor's name and mailing address RYNEL INCORPORATED 11 TWIN RIVERS DR WISCASSET ME 04578-4973 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$938.92
3.2084. Nonpriority creditor's name and mailing address RYNONE MANUFACTURING DANIELLE PORTER 128 N THOMAS AVE SAYRE PA 18840-2126 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,287.28
3.2085. Nonpriority creditor's name and mailing address S & F RADIATOR SERVICE, INC 1022 TONNELLE AVENUE NORTH BERGEN NJ 07047 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,197.67

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3.2086. Nonpriority creditor's name and mailing address S & W SERVICES, INC EASTERN PETROLEUM EQUIPMENT 6057 CORPORATE DRIVE EAST SYRACUSE NY 13057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$363.10
3.2087. Nonpriority creditor's name and mailing address S B SPECIALTY METALS KEN ROBERDS 151 JOHN JAMES AUDUBON PKWY AMHERST NY 14228-1111 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$138.70
3.2088. Nonpriority creditor's name and mailing address S ONE HOLDINGS % TRANSPLACE PO BOX 518 LOWELL AR 72745-0518 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,598.96

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3.2089. Nonpriority creditor's name and mailing address S Q P 300 ELM STREET UNIT 1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$25.00
3.2090. Nonpriority creditor's name and mailing address S.G. REED TRUCK SERVICES, INC 287 WASHINGTON ST PO BOX 989 CLAREMONT NH 03743-0989 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$408.00
3.2091. Nonpriority creditor's name and mailing address SABERT CORPORATION CARGO CLAIMS PO BOX 827615 PHILADELPHIA PA 19182-7615 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$24,495.02

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3.2092. Nonpriority creditor's name and mailing address SABERT CORPORATION CARGO CLAIMS PO BOX 827615 PHILADELPHIA PA 19182-7615 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$747.15
3.2093. Nonpriority creditor's name and mailing address SAFELITE GLASS CORP. PO BOX 633197 CINCINNATI OH 45263-3197 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,461.58
3.2094. Nonpriority creditor's name and mailing address SAFETY ENVIRONMENTAL CONTROL BRIAN GOMES 7 KNOWLTON ST MARLBOROUGH NH 03455-2120 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$675.00

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3.2095. Nonpriority creditor's name and mailing address SAFETY KLEEN CORP P.O. BOX 382066 PITTSBURGH PA 15250-8066 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,017.37
3.2096. Nonpriority creditor's name and mailing address SAFETY ZONE SHAWN RHOADES 3500 INDUSTRIES RD RICHMOND IN 47374-1397 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,216.00
3.2097. Nonpriority creditor's name and mailing address SAFEWAY INC. TRUCKING CORP PO BOX 21006 NEW YORK NY 10087-1006 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,875.00

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3.2098. **Nonpriority creditor's name and mailing address**

SAFTEY INS
POB 704
BOSTON MA 02117-0704

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2099. **Nonpriority creditor's name and mailing address**

SAGER ELECTRONICS
JOHN FAVALORO
19 LEONA DR
MIDDLEBORO MA 02346-1404

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$8,439.00

3.2100. **Nonpriority creditor's name and mailing address**

SAIA INC
LAUREN GUIN
PO BOX A, STATION 1
HOUMA LA 70363

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$8,352.38

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3.2101. Nonpriority creditor's name and mailing address SAIA INC P O BOX 730532 DALLAS TX 75373 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$20,472.08
3.2102. Nonpriority creditor's name and mailing address SAIA LTL FREIGHT KOURTNY LE BOEUF PO BOX A STATION 1 HOUMA LA 70361-5901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$211.32
3.2103. Nonpriority creditor's name and mailing address SAIA LTL FREIGHT KOURTNEY LE BOEUF PO BOX A STATION 1 HOUMA LA 70361-5901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,260.17

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3.2104. Nonpriority creditor's name and mailing address SAIA LTL FREIGHT KOURTNEY LEBOEUF PO BOX A STATION 1 HOUMA LA 70361-5901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$6,834.46
3.2105. Nonpriority creditor's name and mailing address SAIA LTL FREIGHT MONA PREJEAN PO BOX A STATION 1 HOUMA LA 70361-5901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$15,612.95
3.2106. Nonpriority creditor's name and mailing address SAIA LTL FREIGHT CANDAZES PRICE PO BOX A STATION 1 HOUMA LA 70361-5901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$15,770.32

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3.2107. Nonpriority creditor's name and mailing address SAIA LTL FREIGHT CLAIMS DEPT PO BOX A STATION 1 HOUMA LA 70361-5901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$61,978.48
3.2108. Nonpriority creditor's name and mailing address SAIA LTL FREIGHT CANDAZES PRICE PO BOX A STATION 1 HOUMA LA 70361-5901 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,083.05
3.2109. Nonpriority creditor's name and mailing address SAIA, INC P O BOX 730532 DALLAS TX 75373 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$40,298.52

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3.2110. Nonpriority creditor's name and mailing address SAINT CHARLES TRADING INC RUBI HERNANDEZ 1400 MADELINE LA ELGIN IL 60123 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25.00
3.2111. Nonpriority creditor's name and mailing address SAINT GOBAIN ABRASIVES % INTUNE LOGISTICS CLAIM DEPARTMENT 208 ADLEY WAY GREENVILLE SC 29607-6511 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,933.00
3.2112. Nonpriority creditor's name and mailing address SAINT GOBAIN ABRASIVES % INTUNE LOGISTICS-CLAIMS DEPT 208 ADLEY WAY GREENVILLE SC 29607-6511 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$212.60

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3.2113. Nonpriority creditor's name and mailing address SAINT JOSEPHS MEDICAL CENTER DEPT OF RADIOLOGY 127 SOUTH BROADWAY YONKERS NY 10701 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.2114. Nonpriority creditor's name and mailing address SAINT-GOBAIN ABFORS % INTUNE LOGISTICS CLAIMS 208 ADLEY WAY GREENVILLE SC 29607-6511 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,440.41
3.2115. Nonpriority creditor's name and mailing address SAINT-GOBAIN ABRASICES % INTUNE LOGISTICS CLAIMS 208 ADLEY WAY GREENVILLE SC 29607-6511 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,465.80

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<p>3.2116. Nonpriority creditor's name and mailing address</p> <p>SAINT-GOBAIN ABRASIVES % INTUNE LOGISTICS CLAIM DEPARTMENT 208 ADLEY WAY GREENVILLE SC 29607-6511</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,551.75</p>
<p>3.2117. Nonpriority creditor's name and mailing address</p> <p>SAINT-GOBAIN PPL JOHN BROWNE 210 HARMONY RD MICKLETON NJ 08056-1209</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$5,104.38</p>
<p>3.2118. Nonpriority creditor's name and mailing address</p> <p>SAM SON DISRTIBUTION MINDY OEHM 203 EGGERT RD BUFFALO NY 14215-3503</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$7,000.00</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2119. **Nonpriority creditor's name and mailing address**

SAMS CLUB 4855
261 WILSON AVE
HANOVER PA 17331

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2120. **Nonpriority creditor's name and mailing address**

SAMSUNG ELECTRONICS
% DHL SUPPLY CHAIN
570 POLARIS PKWY DEPT 220
WESTERVILLE OH 43082-7900

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,486.65

3.2121. **Nonpriority creditor's name and mailing address**

SAN GREGORY CARTAGE, INC
293 HALL STREET
TIFFIN OH 44883

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,203.29

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2122. **Nonpriority creditor's name and mailing address**

SANCTUS REJUVENATION SPA AND SALON
5048 RT 982
LATROBE PA 15650

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2123. **Nonpriority creditor's name and mailing address**

SANEL AUTO PARTS INC
129 MANCHESTER ST
CONCORD NH 03301

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$191.14

3.2124. **Nonpriority creditor's name and mailing address**

SANJAY PALLETS, INC
424 COSTER STREET
BRONX NY 10474

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,811.90

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2125. Nonpriority creditor's name and mailing address SANTANDER BANK PO BOX 14655 READING PA 19612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,328.18
3.2126. Nonpriority creditor's name and mailing address SANTANDER BANK 450 PENN ST READING PA 19602 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LETTERS OF CREDIT Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,387,344.00
3.2127. Nonpriority creditor's name and mailing address SARATOGA SPRING WATER MARC HORWITZ 11 GEYSER ROAD SARATOGA SPRINGS NY 12866-9038 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,234.70

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2128. Nonpriority creditor's name and mailing address SAROS ELECTRICAL CONTRACTORS 406 CHESTNUT STREET UNION, NJ 07083 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$656.00
3.2129. Nonpriority creditor's name and mailing address SAUDER WOODWORKING JULIA MC CLAIN PO BOX 156 ARCHBOLD OH 43502-0156 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,953.51
3.2130. Nonpriority creditor's name and mailing address SAVEREISEN INC SSCHRUMBERGER 160 GAMMA DR PITTSBURGH PA 15238-2920 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,947.74

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.2131. Nonpriority creditor's name and mailing address</p> <p>SBAR'S DENEEN LAMANCUSA 14 SBAR BLVD MOORESTOWN NJ 08057-1057</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$10,524.12</p>
<p>3.2132. Nonpriority creditor's name and mailing address</p> <p>SCARBOROUGH SANITARY DISTRICT 415 BLACK POINT ROAD SCARBOROUGH ME 04074</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$269.71</p>
<p>3.2133. Nonpriority creditor's name and mailing address</p> <p>SCHALCK*ANDREW Address Intentionally Omitted</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>PENDING WORKERS' COMPENSATION CLAIM</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2134. **Nonpriority creditor's name and mailing address**

SCHIFF*BRIAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2135. **Nonpriority creditor's name and mailing address**

SCHLOTTERBECK & FOSS
JUSTIN CLOUATRE
3 LEDGEVIEW DR
WESTBROOK ME 04092-3939

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$206.70

3.2136. **Nonpriority creditor's name and mailing address**

SCHOENBERG SALT CO.,INC.
AND SUBSIDIARY A&S SALT CO.
P O BOX 128
OCEANSIDE NY 11572

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$25,596.45

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2137. Nonpriority creditor's name and mailing address SCML LOGISTICS COVIDIEN/MEDTRONICT 5944 CORAL RIDGE DRIVE, #261 CORAL SPRINGS FL 33076	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,526.84
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2138. Nonpriority creditor's name and mailing address SCOTT ELECTRIC PO BOX S GREENSBURG PA 15601-0899	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$183.55
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2139. Nonpriority creditor's name and mailing address SCOTT*MARK Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2140. **Nonpriority creditor's name and mailing address**

SDI INSURED EXTRA SPACE STORAGE
136 SOUTH MAIN ST
SPANISH FORK UT 84660

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2141. **Nonpriority creditor's name and mailing address**

SEABREEZE NORTH CORP
PO BOX 535
2958 BRECKSVILLE ROAD
RICHFIELD OH 44286-0535

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,678.30

3.2142. **Nonpriority creditor's name and mailing address**

SEASONAL LANDSCAPE LLC
19 GLEN OAKS DRIVE
ROCHESTER NY 14624

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,510.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2143. Nonpriority creditor's name and mailing address SECURITAS SECURITY SERVICES USA, INC P.O BOX 403412 ATLANTA GA 30384-3412 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$29,659.80
3.2144. Nonpriority creditor's name and mailing address SECURITY LIGHTING MARIA WASILIK 2100 GOLF RD STE 460 ROLLING MEADOWS IL 60008-4274 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$294.00
3.2145. Nonpriority creditor's name and mailing address SECURITY LOCK DISTRIBUTORS C/O WORLDWIDE EXPRESS 2323 VICTORY AVE STE 16 DALLAS TX 75219-7657 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$276.39

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2146. Nonpriority creditor's name and mailing address SECURITY TRANSPORT & DELIVERY PO BOX 12244 ROANOKE VA 24024 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,448.98
3.2147. Nonpriority creditor's name and mailing address SEDGWICK CLAIMS MANAGEMENT SVCS JOSE ARIAS 120 BROADWAY,STE 900 NEW YORK NY 10271-0092 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,885.98
3.2148. Nonpriority creditor's name and mailing address SEDGWICK CLAIMS MGMT DARRON SMITH PO BOX 14670 LEXINGTON KY 40512 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2149. **Nonpriority creditor's name and mailing address**

SELBY, CURT
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2150. **Nonpriority creditor's name and mailing address**

SENTRY SECURITY SERVICES, INC.
P.O. BOX 60089
CHARLOTTE NC 28260-0089

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,318.31

3.2151. **Nonpriority creditor's name and mailing address**

SERRA INTERNATIONAL
ANNA DOMSKA
147-20 181ST ST
JAMAICA NY 11413-4012

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2152. Nonpriority creditor's name and mailing address SERRANO DENTAL EQUIP ERNESTO CINTRON EXT LA ALAMEDA C#51 CALLE SAN JUAN PR 00926	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$3,460.24
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2153. Nonpriority creditor's name and mailing address SERVICE PUMPING & DRAIN CO,INC 5 HALLBERG PARK NORTH READING MA 01864	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$540.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2154. Nonpriority creditor's name and mailing address SERVICE TIRE TRUCK CENTERS 2255 AVENUE A BETHLEHEM PA 18017-2107	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,727.79
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2155. Nonpriority creditor's name and mailing address SERV-US P.O. BOX 325 HACKETTSTOWN NJ 07840	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$511.80
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2156. Nonpriority creditor's name and mailing address SHADES OF GREEN 14032 FAIRVIEW RD CLEAR SPRING MD 21722	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$5,095.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2157. Nonpriority creditor's name and mailing address SHADOW LAKE COUNTRY CLUB PATRICIA WYNN 1850 FIVE MILE LINE RD PENFIELD NY 14526-1070	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$215.10
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2158. **Nonpriority creditor's name and mailing address**

SHAHIRA RODRIGUEZ V
NEW ENGLAND MOTOR FREIGHT INC
RAFAEL AMERSON
1814 HARRISON ST
PHILADELPHIA PA 19124

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2159. **Nonpriority creditor's name and mailing address**

SHANOR ELECTRIC SPLY
NAOMI GARCIA
1276 MILITARY RD
KENMORE NY 14217-1512

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$93.60

3.2160. **Nonpriority creditor's name and mailing address**

SHARKEY*JOHN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2161. **Nonpriority creditor's name and mailing address**

SHARP ELECTRONICS CORP.
DEPT CH 14404
PALATINE IL 60055-4404

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$146.22

3.2162. **Nonpriority creditor's name and mailing address**

SHAUNA JONES
RYAN S GOLDSTEIN ESQ
43 WESTCHESTER AVE
STE 2A
BRONX NY 10461

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2163. **Nonpriority creditor's name and mailing address**

SHAW'S SUPERMARKETS, INC
SAFEWAY
PO BOX 742918
LOS ANGELES CA 90074-2918

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,264.90

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2164. **Nonpriority creditor's name and mailing address**

SHEARER EQUIPMENT
JOHN DEERE DEALER
7762 CLEVELAND RD
WOOSTER OH 44691-7700

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$250.58

3.2165. **Nonpriority creditor's name and mailing address**

SHERLENE PICKNEY
BRAMNICK RODRIGUEZ ATTORNEYS AT LAW
BRENT BRAMNICK
1827 EAST SECOND ST
SCOTCH PLAINS NJ 07076

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2166. **Nonpriority creditor's name and mailing address**

SHERLENE PICKNEY V
NEW ENGLAND MOTOR FREIGHT INC
JAMES RYAN
1400 HAVEN RD
APT G21
HAGERSTOWN MD 21742

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2167. Nonpriority creditor's name and mailing address SHERWIN WILLIAMS JUDITH JOHNSON 101 PROSPECT AVE 720 GUILDHALL CLEVELAND OH 44115-1093 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,118.87
3.2168. Nonpriority creditor's name and mailing address SHERWIN WILLIAMS P O BOX 818019 CLEVELAND OH 44181-8019 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,127.48
3.2169. Nonpriority creditor's name and mailing address SHERWIN WILLIAMS 226 TALMADGE ROAD EDISON NJ 08817 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$167.83

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2170. Nonpriority creditor's name and mailing address SHIP USA NICOLE KLOTZLE 1347 N MAIN ST ORRVILLE OH 44667-9761 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,868.87
3.2171. Nonpriority creditor's name and mailing address SHIPLEY FUELS MARKETING, LLC PO BOX 15052 YORK PA 17405 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,859.42
3.2172. Nonpriority creditor's name and mailing address SHIPLIFY LLC 1425 ELLSWORTH INDUSTRIAL BLVD SUITE 24 ATLANTA GA 30318 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,500.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2173. **Nonpriority creditor's name and mailing address**

SHIPPERS SUPPLIES
P O BOX 337
BELLVILLE OH 44813

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$417.00

3.2174. **Nonpriority creditor's name and mailing address**

SHORE BUSINESS SOLUTIONS
THE COPIER CENTER
P.O. BOX 2428
FARMINGDALE NJ 07727

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,048.81

3.2175. **Nonpriority creditor's name and mailing address**

SHUDA*TIMOTHY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2176. **Nonpriority creditor's name and mailing address**

SIBLEY*JOHN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2177. **Nonpriority creditor's name and mailing address**

SID HARVEY INDUSTRIES
CHRISTINE KLUG
1052 HANOVER ST
WILKES BARRE PA 18706-2000

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2178. **Nonpriority creditor's name and mailing address**

SIEMON CO
C/O LYNNCO SCS
2448 E 81ST ST STE 2600
TULSA OK 74137-4250

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$75.04

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2179. Nonpriority creditor's name and mailing address SIGN HERE SHOLOM HOCHRAN 575 PROSPECT ST UNIT 251B LAKEWOOD NJ 08701-5040 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,653.01
3.2180. Nonpriority creditor's name and mailing address SILVER PALATE KITCHEN JESUSA UMALI 211 KNICKERBOCKER AVE CRESSKILL NJ 07626-1830 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00
3.2181. Nonpriority creditor's name and mailing address SILVER PALATE KITCHEN JESUSA UMALI 211 KNICKERBOCKER AVE CRESSKILL NJ 07626-0512 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$56.58

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2182. Nonpriority creditor's name and mailing address SILVER PALATE KITCHENS JESUSA UMALI 211 KNICKERBOCKER RD CRESSKILL NJ 07626-1830 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,734.96
3.2183. Nonpriority creditor's name and mailing address SILVER TRUCKING CO LLC 5731A CRAIN HIGHWAY SUITE 211 UPPER MARLBORO MD 20772 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$77,700.00
3.2184. Nonpriority creditor's name and mailing address SIMPLE TRANSPORTATION, INC 432 E MAJOR DR NORTHLAKE IL 60164 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,674.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.2185. Nonpriority creditor's name and mailing address</p> <p>SIMPLIFIED LOGISTICS PO BOX 40088 BAY VILLAGE OH 44140-0088</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$142.11</p>
<p>3.2186. Nonpriority creditor's name and mailing address</p> <p>SIMPLY UNIQUE SNACKS STEVE HOFFORD 4420 HAIGHT AVE CINCINNATI OH 45223</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$50.00</p>
<p>3.2187. Nonpriority creditor's name and mailing address</p> <p>SISSON*GLENN Address Intentionally Omitted</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>PENDING WORKERS' COMPENSATION CLAIM</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2188. Nonpriority creditor's name and mailing address SIXTH CITY DISTRIBUT RYAN REED 13981 WEST PARKWAY CLEVELAND OH 44135-4511	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$5,200.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2189. Nonpriority creditor's name and mailing address SKH FOOD DISTRIBUTORS WAYNE GOODMAN 813 LITITZ PIKE LITITZ PA 17543-8629	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$69.20
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2190. Nonpriority creditor's name and mailing address SLA SALES 149 JOE COLE LANE WINTHROP ME 04364	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$660.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2191. **Nonpriority creditor's name and mailing address**

SMARTDRIVE SYSTEMS INC
PO BOX 80452
CITY OF INDUSTRY CA 91716-8452

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$13,106.06

3.2192. **Nonpriority creditor's name and mailing address**

SMC
PO BOX 2040
PEACHTREE CITY GA 30269

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,750.00

3.2193. **Nonpriority creditor's name and mailing address**

SMITH*ALBERT
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2194. **Nonpriority creditor's name and mailing address**

SMITH*EARL
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2195. **Nonpriority creditor's name and mailing address**

SMITH*GORDON
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2196. **Nonpriority creditor's name and mailing address**

SMITH*MARK
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2197. Nonpriority creditor's name and mailing address SNI COMPANIES PO BOX 840912 DALLAS TX 75284-0912 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,576.61
3.2198. Nonpriority creditor's name and mailing address SNYDER TIRE CO. 103 E. PENN ST. LEHIGHTON PA 18235 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$225.93
3.2199. Nonpriority creditor's name and mailing address SOCIAL SECURITY ADMINISTRATION 20 SOUTH BROADWAY STE 1000 YONKERS NY 10701 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$38.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2200. **Nonpriority creditor's name and mailing address**

SODEXO
700 SYSVAN AVE
ENGLEWOOD CLIFFS NJ 07632

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2201. **Nonpriority creditor's name and mailing address**

SOE
STONE'S OFFICE EQUIPMENT
5604 W BROAD STREET
RICHMOND VA 23230

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$189.32

3.2202. **Nonpriority creditor's name and mailing address**

SOKOLOSKI*WALTER
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2203. Nonpriority creditor's name and mailing address SOLENIS AMANDA BRYAN 1111 GRATTAN ST CHICOPEE MA 01013-5213 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,537.74
3.2204. Nonpriority creditor's name and mailing address SOLENIS P O BOX 67 SAINT LOUIS MO 63166-0067 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,011.89
3.2205. Nonpriority creditor's name and mailing address SOLENIS P O BOX 67 SAINT LOUIS MO 63166-0067 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$12,637.03

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2206. Nonpriority creditor's name and mailing address SOLEY'S TOWING 1844 W PENN PIKE NEW RINGGOLD PA 17960 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,142.50
3.2207. Nonpriority creditor's name and mailing address SOLIMENE & SECONDO LLP 1501 EAST MAIN ST. STE 204 MERIDEN CT 06450 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$653.50
3.2208. Nonpriority creditor's name and mailing address SOMA LABS INC ANNA BARABOI 248-252 WAGNER ST MIDDLESEX NJ 08846 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$490.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2209. Nonpriority creditor's name and mailing address SOS GASES INC 1100 HARRISON AVE KEARNY NJ 07032 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,461.36
3.2210. Nonpriority creditor's name and mailing address SOURCE ALLIANCE NETWORK PAULA GOWER 2023 W CARROLL AVE #C205 CHICAGO IL 60612-1691 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$155.00
3.2211. Nonpriority creditor's name and mailing address SOUTH FARM SARAH GREER 8398 BUNDYSBURG RD MIDDLEFIELD OH 44062-9387 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2212. Nonpriority creditor's name and mailing address SOUTH SHORE OFFICE PRODUCTS 60 ENTER LANE ISLANDIA NY 11749-4811 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$27.89
3.2213. Nonpriority creditor's name and mailing address SOUTHERN CONNECTICUT GAS PO BOX 9112 CHELSEA MA 02150-9112 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$443.33
3.2214. Nonpriority creditor's name and mailing address SOUTHERN STATES S GHOLSON PO BOX 26234 RICHMOND VA 23260 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$529.23

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2215. Nonpriority creditor's name and mailing address SOUTHERN TIER LIFT 124 WALTERS ROAD WHITNEY POINT NY 13862	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,582.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2216. Nonpriority creditor's name and mailing address SOUTHSIDE TRAILER SERVICE, INC PO BOX 2300 BLASDELL NY 14219	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,584.81
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2217. Nonpriority creditor's name and mailing address SOUTHWEST COMMERCIAL CARGO CLAIMS 2436 LUDELLE ST FORT WORTH TX 76105-1017	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2218. Nonpriority creditor's name and mailing address SOWLE AUTO BODY, INC 3956 STATE HWY 30A FULTONVILLE NY 12072 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,220.00
3.2219. Nonpriority creditor's name and mailing address SPAN ALASKA TRANSPORTATION,LLC 3815 W VALLEY HWY N AUBURN WA 98001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$302.18
3.2220. Nonpriority creditor's name and mailing address SPARKLE WASH CENTRAL INDIANA 13662 THISTLEWOOD DR E CARMEL IN 46032 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$180.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2221. Nonpriority creditor's name and mailing address SPARROW ENTERPRISES HENRY BAYBUT \$75 LUMPER 98R CONDOR STREET EAST BOSTON MA 02128-1306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$438.50
3.2222. Nonpriority creditor's name and mailing address SPARROW ENTERPRISES KATHLEEN BROWN 98R CONDOR STREET EAST BOSTON MA 02128-1306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$393.44
3.2223. Nonpriority creditor's name and mailing address SPARTAN RE COVERIES LLC 25 ORVILLE DR STE 101 BOHEMIA NY 11716 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2224. Nonpriority creditor's name and mailing address SPECIALTY ADHESIVES & COATING CLAIMS DEPT 65 INDUSTRIAL RD ELIZABETHTOWN PA 17022-9426 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$344.03
3.2225. Nonpriority creditor's name and mailing address SPECIALTY ADHESIVES & COATING CLAIMS DEPT 3791 AIR PARK ST MEMPHIS TN 38118-6004 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,844.76
3.2226. Nonpriority creditor's name and mailing address SPECIALTY STORE SERVICES JAY ARELLANO 454 JARVIS AVE DES PLAINES IL 60018-1912 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$342.33

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2227. Nonpriority creditor's name and mailing address SPECTROTEL PO BOX 1949 NEWARK NJ 07101-1949 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,852.79
3.2228. Nonpriority creditor's name and mailing address SPECTRUM PLUS 663 OLD WILLETS PATH HAUPPAUGE NY 11788 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,180.77
3.2229. Nonpriority creditor's name and mailing address SPECTRUM TRANS. ATTN: WAYNE YEE 361 SOUTH MAIN STREET FALL RIVER MA 02721 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$131.65

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2230. Nonpriority creditor's name and mailing address SPEED GLOBAL SERVICES CHRIS FORTE 2299 KENMORE AVE BUFFALO NY 14207-1311 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2231. Nonpriority creditor's name and mailing address SPINDRIFT SODA % LOGISTXS INC 1500 ROUTE 517 STE 305 HACKETTSTOWN NJ 07840-2717 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$160.73
3.2232. Nonpriority creditor's name and mailing address SPINNING WHEELS EXPRESS CHERYL JOHNSON 152 LYNNWAY STE 2D LYNN MA 01902-3420 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,547.80

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2233. Nonpriority creditor's name and mailing address SPINNING WHEELS EXPRESS CHERYL JOHNSON 152 LYNNWAY SUITE 2D LYNN MA 01902	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$241.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2234. Nonpriority creditor's name and mailing address SPINO*SAMUEL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2235. Nonpriority creditor's name and mailing address SPLASH SHIELD CLAIMS DEPT 49 VIRGINIA AVE UNIONTOWN PA 15401-4929	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,178.76
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2236. Nonpriority creditor's name and mailing address SPOT FREIGHT INC NICOLE SMITH 141 S MERIDIAN ST STE 200 INDIANAPOLIS IN 46225-1027 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$564.37
3.2237. Nonpriority creditor's name and mailing address SPOTLESS CLEANING AND MAID SERVICE 13 NEW BROADWAY WESTFIELD MA 01085 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,400.00
3.2238. Nonpriority creditor's name and mailing address SPOTTS*GILBERT Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2239. **Nonpriority creditor's name and mailing address**

SPRINGER*DUSTIN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2240. **Nonpriority creditor's name and mailing address**

SPRINT
PO BOX 4181
CAROL STREAM IL 60197-4181

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$8,205.47

3.2241. **Nonpriority creditor's name and mailing address**

SQP
TECH TRANSPORT
300 ELM ST UNIT 1
MILFORD NH 03055

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$229.66

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2242. Nonpriority creditor's name and mailing address SQP INC % TECH LOGISTICS 300 ELM ST UNIT 1 MILFORD NH 03055-4715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,488.96
3.2243. Nonpriority creditor's name and mailing address SQP INC % TECH TRANSPORT 300 ELM ST UNIT 1 MILFORD NH 03055 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25.00
3.2244. Nonpriority creditor's name and mailing address ST PAUL FIRE AND MARINE INSURANCE CO 201 COUNTY BLVD STE 505 BRAMPTON ON L6W 4L2 CANADA Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2245. **Nonpriority creditor's name and mailing address**

STAFAST BUILDING PRODUCTS
DEBRA HAYES
7095 AMERICANA PKWY
REYNOLDSBURG OH 43068-4118

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2246. **Nonpriority creditor's name and mailing address**

STANDARD DISTRIBUTING
AP
100 MEWS DR
NEW CASTLE DE 19720

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2247. **Nonpriority creditor's name and mailing address**

STANDARD ENVELOPES
S KAMRAN ZAIDI
220 HUFF AVE STE 600
GREENSBURG PA 15601-5376

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,238.35

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2248. Nonpriority creditor's name and mailing address STANLEY BLACK & DECKER P O BOX 982262 EL PASO TX 79998-2262 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$1,151.99
3.2249. Nonpriority creditor's name and mailing address STANLEY MATERIAL HANDLING 8094 SAINTSVILLE ROAD KIRKVILLE NY 13082 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$859.03
3.2250. Nonpriority creditor's name and mailing address STAPLES BUSINESS ADVANTAGE PO BOX 70242 PHILADELPHIA PA 19176-0246 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,947.54

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2251. Nonpriority creditor's name and mailing address STAPLES CREDIT PLAN DEPT. 00-01191337 PO BOX 9001036 LOUISVILLE KY 40290-1036 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$349.95
3.2252. Nonpriority creditor's name and mailing address STAPLES INC SUSAN CULLEN 500 STAPLES DR FRAMINGHAM MA 01702-4478 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,995.71
3.2253. Nonpriority creditor's name and mailing address STAPLES INC SUSAN CULLEN 500 STAPLES DRIVE FRAMINGHAM MA 01702-4478 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,527.97

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2254. Nonpriority creditor's name and mailing address STAR PRESSURE CLEANING INC P O BOX 181281 FAIRFIELD OH 45018 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$300.27
3.2255. Nonpriority creditor's name and mailing address STAR WIPERS INC ROBERT RAINERI 1125 E MAIN ST NEWARK OH 43055-8869 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,509.30
3.2256. Nonpriority creditor's name and mailing address STARLIGHT DIST % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,332.03

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2257. Nonpriority creditor's name and mailing address STAR-LITE PROPANE 111 SOUTH FOURTH ST BAY SHORE NY 11706 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,278.61
3.2258. Nonpriority creditor's name and mailing address STARLITE SERVICES INC SHARI RAYA 1165 CROSSROADS PKWY ROMEIOVILLE IL 60446-1166 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,118.80
3.2259. Nonpriority creditor's name and mailing address STARNET SOLUTIONS, INC P O BOX 313 FARMINGDALE NJ 07727 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$896.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2260. **Nonpriority creditor's name and mailing address**

STARR INDEMNITY AND LIABILITY CO
399 PK AVE
2ND FL
NEW YORK NY 10022

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

TRADE PAYABLES - INSURANCE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2261. **Nonpriority creditor's name and mailing address**

STATE ELECTRIC SUPPLY COMPANY
RACHEL GRAY
PO BOX 5397
HUNTINGTON WV 25703-0397

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$400.00

3.2262. **Nonpriority creditor's name and mailing address**

STATE FARM
PO BOX 106172
ATLANTA GA 30348

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2263. **Nonpriority creditor's name and mailing address**

STATE FARM AUTO CLAIMS
PO BOX 52250
PHOENIX AZ 85072

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2264. **Nonpriority creditor's name and mailing address**

STATE FARM AUTO CLAIMS
CHRIS MEYER CLAIMS
PO BOX 52250
PHOENIX AZ 85072

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2265. **Nonpriority creditor's name and mailing address**

STATE FARM DEANNA PLATT
PO BOX 106172
ATLANTA GA 30348

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2266. **Nonpriority creditor's name and mailing address**

STATE FARM INS
CYNTHIA WALLING
PO BOX 106172
ATLANTA GA 30348

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2267. **Nonpriority creditor's name and mailing address**

STATE FARM INSURANCE
ATTORNEY FOR PLAINTIFF
WILBER AND ASSOCIATES PC
MARIE HERNANDEZ
210 LANDMARK DR
NORMAL IL 61761

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2268. **Nonpriority creditor's name and mailing address**

STATE FARM MUTUAL AS SUB OF O
INTERNATIONAL EXTERMINATING
SUBRO SERV
PO BOX 106172
ATLANTA GA 30348-6172

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,859.60

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2269. **Nonpriority creditor's name and mailing address**

STATE FARM MUTUAL AUTO INSUR CO
VINCE A SABELLA ESQ
PO BOX 9006
114 OLD COUNTRY RD STE 500
MINEOLA NY 11501

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2270. **Nonpriority creditor's name and mailing address**

STATE FARM MUTUAL AUTO INSUR CO
FOR DEREK DOWDELL
PAPPAS COX KIMPEL DODD AND LEVINE PC
P DOUGLAS DODD ESQ
614 JAMES ST STE 100
SYRACUSE NY 13203

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2271. **Nonpriority creditor's name and mailing address**

STATE FARM MUTUAL AUTO INSUR CO
PAPPAS COX KIMPEL DODD AND LEVINE PC
P DOUGLAS DODD ESQ
614 JAMES ST
STE 100
SYRACUSE NY 13203

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2272. **Nonpriority creditor's name and mailing address**

STATE FARM MUTUAL AUTO INSUR. CO. V.
NEMF, AARON LYNN
RATHBONE GROUP LLC
JASON SULLIVAN, STEVEN ALSIP
1100 SUPERIOR AVE.
SUITE 1850
CLEVELAND OH 44114

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2273. **Nonpriority creditor's name and mailing address**

STATEWIDE TAX RECOVERY INC
PO BOX 752
100 NORTH THIRD ST
SUNBURY PA 17801

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$75.05

3.2274. **Nonpriority creditor's name and mailing address**

STEFAN ALISTAIR RIERA AND MONIQUE FORD
PICCIANO AND SCAHILL PC
FRANK SCAHILL ESQ
900 MERCHANTS CONCOURSE
STE 310
WESTBURY NY 11590

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2275. **Nonpriority creditor's name and mailing address**

STENGEL BROTHERS INC.
1105 SUMNER AVENUE
WHITEHALL PA 18052

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$43,515.32

3.2276. **Nonpriority creditor's name and mailing address**

STENGLEIN*GARY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2277. **Nonpriority creditor's name and mailing address**

STENGLEIN*GARY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2278. **Nonpriority creditor's name and mailing address**

STENGLEIN*GARY
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2279. **Nonpriority creditor's name and mailing address**

STEP 2
% AMRATE
19801 HOLLAND RD
BROOKPARK OH 44142-1339

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,922.19

3.2280. **Nonpriority creditor's name and mailing address**

STEPHEN ROSS
ATTORNEY FOR DEFENDANT
ROETZEL AND ANDRESS LPA
PHILIP S HEEBSH
ONE SEA GATE SUITE 1700
TOLEDO OH 43604

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2281. **Nonpriority creditor's name and mailing address**

STEPHEN ROSS V
NEW ENGLAND MOTOR FREIGHT INC ET AL
TERRY KEATON
1264 SUGAR GROVE RD
LANCASTER OH 43130

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2282. **Nonpriority creditor's name and mailing address**

STERLING INFO SYSTEMS,INC
P. O. BOX 35626
NEWARK NJ 07193-5626

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$16,596.75

3.2283. **Nonpriority creditor's name and mailing address**

STEVE J. FINK & ASSOC, PC
25 E WASHINGTON STREET
SUITE 1233
CHICAGO IL 60602

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$211.42

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2284. Nonpriority creditor's name and mailing address STEVEN WILLAND PATRICK DAVENPORT 23 RTE 206 P O BOX 9 AUGUSTA NJ 07822-0009 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$155.42
3.2285. Nonpriority creditor's name and mailing address STIEBEL ELTRON BRUCE MC LEAN 15 B WEST ST WEST HATFIELD MA 01088-9516 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,875.00
3.2286. Nonpriority creditor's name and mailing address STOUT*CURTIS Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2287. **Nonpriority creditor's name and mailing address**

STOUT*CURTIS
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2288. **Nonpriority creditor's name and mailing address**

STRAIGHT FORWARD CHB
JOEL FLEISCHMAN
126 NOSTRAND AVE
BROOKLYN NY 11206

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$5,280.00

3.2289. **Nonpriority creditor's name and mailing address**

STRAIGHT-N-CLEAR,LLC
3551 STATE ROUTE 156
SUITE A
AVONMORE PA 15618

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$490.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2290. **Nonpriority creditor's name and mailing address**

STRATEGIC COMMERCE
PO BOX 617877
CHICAGO IL 60661

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$601.67

3.2291. **Nonpriority creditor's name and mailing address**

STRAUSS, FACTOR, LAING & LYONS
ONE DAVOL SQUARE
SUITE #305, FILE #85161
PROVIDENCE RI 02903

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$30.00

3.2292. **Nonpriority creditor's name and mailing address**

STROHL*BRIAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2293. Nonpriority creditor's name and mailing address SUBURBAN AUTO SEAT CO. 35 INDUSTRIAL ROAD LODI NJ 07644	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$5,817.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2294. Nonpriority creditor's name and mailing address SUBURBAN PROPANE PO BOX 270 WHIPPANY CT 07981	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$533.30
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2295. Nonpriority creditor's name and mailing address SUBURBAN PROPANE PO BOX 260 WHIPPANY NJ 07981	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,890.73
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2296. Nonpriority creditor's name and mailing address SUBURBAN PROPANE PO BOX G WHIPPANY NJ 07981-0406 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,327.01
3.2297. Nonpriority creditor's name and mailing address SUBURBAN PROPANE PO BOX F WHIPPANY NJ 07981-0405 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,158.26
3.2298. Nonpriority creditor's name and mailing address SUBURBAN PROPANE PO BOX 290 WHIPPANY NJ 07981-0170 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$30,242.56

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2299. Nonpriority creditor's name and mailing address SUBURBAN PROPANE PO BOX 160 WHIPPANY NJ 07981	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$13,507.04
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2300. Nonpriority creditor's name and mailing address SUBURBAN PROPANE LP PO BOX 300 WHIPPANY NJ 07981-0300	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,935.61
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2301. Nonpriority creditor's name and mailing address SUBURBAN PROPANE, L.P. PO BOX J WHIPPANY NJ 07981	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$39,678.86
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2302. Nonpriority creditor's name and mailing address SUDZ HOT WASH & DETAIL A DIV OF HAYLEY ENTERPRISE LLC 17441 CINDY LANE HAGERSTOWN MD 21740-1642 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$320.00
3.2303. Nonpriority creditor's name and mailing address SULLIVAN DESIGN INC ERIN GELLER 6215 HEISLEY RD UNIT B MENTOR OH 44060-1877 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00
3.2304. Nonpriority creditor's name and mailing address SULLIVAN TIRE CO P O BOX 370 ROCKLAND MA 02370 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$647.49

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2305. **Nonpriority creditor's name and mailing address**

SUM REALTY LLC
369 LEXINGTON AVE
12TH FL
NEW YORK NY 10017

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2306. **Nonpriority creditor's name and mailing address**

SUNCOM INDUSTRIES, INC
PO BOX 46
NORTHUMBERLAND PA 17857

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$194.55

3.2307. **Nonpriority creditor's name and mailing address**

SUNDIA CORPORATION
ANNE THYS
25 ORINDA WAY STE 300A
ORINDA CA 94563-4403

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$781.98

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2308. Nonpriority creditor's name and mailing address SUNNY MARKETING SYSTEMS JOHN KANG 163 E BETHPAGE RD PLAINVIEW NY 11803-4222	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$11,475.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2309. Nonpriority creditor's name and mailing address SUNTECK TRANSPORT GROUP JULIE LAWSON 4500 SALISBURY RD STE 305 JACKSONVILLE FL 32216-0959	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$5,818.24
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2310. Nonpriority creditor's name and mailing address SUNTECK TRANSPORT GROUP JULIE LAWSON 4500 SALISBURY RD STE 305 JACKSONVILLE FL 32216-0959	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$304.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2311. Nonpriority creditor's name and mailing address SUNTEK TRANSPORT 11000 FRISCO ST SUITE 100 FRISCO TX 75034 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$533.84
3.2312. Nonpriority creditor's name and mailing address SUPERGLASS WINDSHIELD REPAIR PO BOX 1536 LINDEN NJ 07036 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$125.00
3.2313. Nonpriority creditor's name and mailing address SUPERIOR DISTRIBUTORS 4 MIDLAND AVENUE ELMWOOD PARK NJ 07407 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$243,465.74

Debtor **New England Motor Freight, Inc.**

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3.2314. Nonpriority creditor's name and mailing address SUPERVALU C/O TRANSAVER, LLC ATTN: DANA MCALLISTER 108 WASHINGTON ST MANLIUS NY 13104 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,914.38
3.2315. Nonpriority creditor's name and mailing address SUREWAY PRINTING & GRAPHICS 338 WALL STREET PRINCETON NJ 08540 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$58.00
3.2316. Nonpriority creditor's name and mailing address SUSAN COHEN GRANTOR TRUST 1-71 NORTH AVENUE EAST ELIZABETH NJ 07201 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INSIDER PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,825.00

Debtor **New England Motor Freight, Inc.**

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3.2317. **Nonpriority creditor's name and mailing address**

SUSAN VOLPE
KRAMER DILLOF LIVINGSTON AND MOORE
JOHN CAGNEY ESQ
217 BROADWAY
NEW YORK NY 10007

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2318. **Nonpriority creditor's name and mailing address**

SUSQUEHANNA FIRE EQUIPMENT CO
PO BOX 209
2122 MAIN STREET
DEWART PA 17730

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$148.35

3.2319. **Nonpriority creditor's name and mailing address**

SUSQUEHANNA VALLEY
131 W MAIN ST
SALUNGA PA 17538-1128

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$63.00

Debtor **New England Motor Freight, Inc.**

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3.2320. **Nonpriority creditor's name and mailing address**

SUZADAIL*PAUL
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2321. **Nonpriority creditor's name and mailing address**

SVB FOOD & BEVERAGE
CHRISTINA LAING
717 CORNING WAY
MARTINSBURG WV 25405-2518

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,149.95

3.2322. **Nonpriority creditor's name and mailing address**

SWARTZ CAMPBELL LLC
TWO LIBERTY PLACE
50 S. 16TH ST. 28TH FLOOR
PHILADELPHIA PA 19102

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$14,807.14

Debtor **New England Motor Freight, Inc.**

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3.2323. Nonpriority creditor's name and mailing address SWIMLINE CORP CECILIA GARCIA 191 RODEO DRIVE EDGEWOOD NY 11717-8319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$3,508.65
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2324. Nonpriority creditor's name and mailing address SWOPE*DAVID Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2325. Nonpriority creditor's name and mailing address SYNCB AMAZON P O BOX 530958 ATLANTA GA 30353-0958	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,161.88
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2326. Nonpriority creditor's name and mailing address SYN-TECH SYSTEMS INC PO BOX 5258 TALLAHASSEE FL 32314 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$760.00
3.2327. Nonpriority creditor's name and mailing address SYNTER RESOURCE GROUP, LLC PO BOX 62016 NORTH CHARLESTON SC 29419 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$84.75
3.2328. Nonpriority creditor's name and mailing address SYNTHASYS, LLC 8126 LAKEWOOD MAIN ST. SUITE 202 LAKEWOOD RANCH FL 34202 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$687.50

Debtor **New England Motor Freight, Inc.**

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3.2329. Nonpriority creditor's name and mailing address SYSTEM4 OF BOSTON 99 DERBY STREET SUITE 300 HINGHAM MA 02043 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$959.00
3.2330. Nonpriority creditor's name and mailing address SYSTON CABLE TECHNOLOGY JERRY LEE 15278 EL PRADO RD CHINO CA 91710-7623 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,089.69
3.2331. Nonpriority creditor's name and mailing address TA INDUSTRIES JOHN YU 11335 GREENSTONE AVE SANTA FE SPRINGS CA 90670-4618 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$762.43

Debtor **New England Motor Freight, Inc.**

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3.2332. **Nonpriority creditor's name and mailing address**

TA INDUSTRIES
LOU LOPEZ
11335 GREENSTONE AVE
SANTA FE SPRINGS CA 90670-4618

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$17,891.24

3.2333. **Nonpriority creditor's name and mailing address**

TACONIC WIRE
JANINE LATELLA
250 TOTOKET RD
NORTH BRANFORD CT 06471-1035

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,591.80

3.2334. **Nonpriority creditor's name and mailing address**

TANOLA R ENNIS
ATTORNEY FOR THE PLAINTIFF
SANDERS SANDERS BLOCK WOYCIK VIENER
AND GROSSMAN PC
100 HARRICKS RD
MINEOLA NY 11501

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2335. **Nonpriority creditor's name and mailing address**

TANOLA R ENNIS V
NEW ENGLAND MOTOR FREIGHT INC ET AL
BRENT BOMIA
98 ELLENEL BLVD
SPOTSWOOD NJ 08884

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2336. **Nonpriority creditor's name and mailing address**

TAPCO
JANET KERR
PO BOX 457
SHARON CENTER OH 44274-0457

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$736.50

3.2337. **Nonpriority creditor's name and mailing address**

TAPCO
EMILY MC GEHEE
29797 BECK RD
WIXOM MI 48393-2834

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,310.33

Debtor **New England Motor Freight, Inc.**

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3.2338. Nonpriority creditor's name and mailing address TAPCO CLAYTON WHEATLEY 29797 BECK ROAD WIXOM MI 48393-2834 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$141.25
3.2339. Nonpriority creditor's name and mailing address TATIS*CAMILO Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2340. Nonpriority creditor's name and mailing address TAYLOR MADE PRODUCTS % IL2000 PO BOX 8372 VIRGINIA BEACH VA 23450-8372 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$817.15

Debtor **New England Motor Freight, Inc.**

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3.2341. Nonpriority creditor's name and mailing address TAYLOR NORTHEAST INC 931 HEMLOCK ROAD MORGANTOWN PA 19543 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,501.24
3.2342. Nonpriority creditor's name and mailing address TD BANK NA 1701 ROUTE 70 EAST CHERRY HILL NJ 08034 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GUARANTEE OF EASTERN FREIGHTWAYS, INC. LOAN Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$0.00
3.2343. Nonpriority creditor's name and mailing address TDS CAROLINE KRIER 550 VILLAGE CENTER DRIVE STE 100 SAINT PAUL MN 55127-3022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2344. Nonpriority creditor's name and mailing address TDS CAROLINE KRIER 550 VILLAGE CENTER, SUITE 100 SAINT PAUL MN 55127-3022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,874.00
3.2345. Nonpriority creditor's name and mailing address TDS CAROLINE KRIER 550 VILLAGE CNTR DR SAINT PAUL MN 55127-3022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00
3.2346. Nonpriority creditor's name and mailing address TDS INC CARGO CLAIMS 550 VILLAGE CENTER DR STE 100 SAINT PAUL MN 55127-3022 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2347. **Nonpriority creditor's name and mailing address**

TEACHERS INSURANCE PLAN OF NJ
DEBRA HART
JENNIFER L PARSONS ESQ
303 FELLOWSHIP RD
STE 300
MT. LAUREL NJ 08054

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

DISMISSED LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2348. **Nonpriority creditor's name and mailing address**

TECH LOGISTICS
300 ELM STREET
UNIT 1
MILFORD NH 03055-4715

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$89.77

3.2349. **Nonpriority creditor's name and mailing address**

TECHNICAL TRAFFIC CONSULTANTS
CLAIMS DEPT
30 HEMLOCK DR
CONGERS NY 10920-1402

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$11,775.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2350. Nonpriority creditor's name and mailing address TECSTONE GRANITE USA BRADLEY STELZER 2400 LANDMARK WAY COLUMBUS OH 43219-3658 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$659.84
3.2351. Nonpriority creditor's name and mailing address TED'S TOWING SERVICES INC. 4920 HAZELWOOD AVE. BALTIMORE MD 21206 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$935.00
3.2352. Nonpriority creditor's name and mailing address TEIXEIRA*VICTOR Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2353. Nonpriority creditor's name and mailing address TENNESSEE CHILD SUPPORT RECEIPTING UNIT PO BOX 305200 NASHVILLE TN 37229 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$166.84
3.2354. Nonpriority creditor's name and mailing address TF LOGISTICS P O BOX 983 INDIANAPOLIS IN 46206 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,800.00
3.2355. Nonpriority creditor's name and mailing address TFH PUBLICATIONS ANN MARIE SCOTTI 85 W SYLVANIA AVE NEPTUNE CITY NJ 07753-6775 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$544.32

Debtor **New England Motor Freight, Inc.**

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3.2356. Nonpriority creditor's name and mailing address TFH PUBLICATIONS DANIELLE PIMIENTA 85 W SYLVANIA AVE NEPTUNE CITY NJ 07753-6775 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$869.76
3.2357. Nonpriority creditor's name and mailing address TFH PUBLICATIONS NATALIE SAAKES 965 CRANBURY S RIVER RD JAMESBURG NJ 08831-3407 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,727.62
3.2358. Nonpriority creditor's name and mailing address TFH PUBLICATIONS DANIELLE PIMIENTA 85 W SYLVANIA AVE NEPTUNE CITY NJ 07753-6775 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$321.60

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2359. Nonpriority creditor's name and mailing address TGR LOGISTICS HEATHER CHAMBERLAIN 13990 FIR ST OREGON CITY OR 97045-8906 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,541.76
3.2360. Nonpriority creditor's name and mailing address THANG TRAN ADAM S GETSON ESQ WAPNER NEWMAN 2000 MARKET STREET SUITE 2750 PHILADELPHIA PA 19103 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2361. Nonpriority creditor's name and mailing address THANG TRAN AND YEN LAM, HIS WIFE 320 BELMONT DRIVE CHERRY HILL NJ 08002 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2362. **Nonpriority creditor's name and mailing address**

THANG TRAN V NEW ENGLAND MOTOR
FREIGHT INC
RUSSELL D LORE
453 WASHINGTON TER
AUDUBON NJ 08106-2143

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2363. **Nonpriority creditor's name and mailing address**

THE AUTO BARN, INC.
2930 JAMES STREET
BALTIMORE MD 21230

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$415.98

3.2364. **Nonpriority creditor's name and mailing address**

THE BOROUGH OF SEWICKLEY KEVIN
FLANNERY MGR
601 THORN ST
PO BOX 428
SEWICKLEY PA 15143

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2365. Nonpriority creditor's name and mailing address THE CITY OF NEW YORK FIRE DEPT ATTN: REVENUE MNG 9 METROTECH CENTER ROOM #5E = 5 BROOKLYN NY 11201-3857 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2.25
3.2366. Nonpriority creditor's name and mailing address THE DAVINCI GROUP, LLC 40 EAST MAIN STREET SUITE 250 NEWARK DE 19711 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$26,885.00
3.2367. Nonpriority creditor's name and mailing address THE ELM GROUP, INC 345 WALL STREET RESEARCH PARK PRINCETON NJ 08540-1512 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,445.76

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2368. Nonpriority creditor's name and mailing address THE HOME DEPOT 90 MONROE TURNPIKE TRUMBULL CT 06611-1341	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$281,846.31
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.2369. Nonpriority creditor's name and mailing address THE HOSE SHOP 100 NEW ENGLAND AVENUE PISCATAWAY NJ 08854	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$69.27
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2370. Nonpriority creditor's name and mailing address THE HOSPITAL OF CENTRAL CT 100 GRAND STREET NEW BRITIAN CT 06050	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$906.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2371. **Nonpriority creditor's name and mailing address**

THE MAINTENANCE CONNECTION INC
P O BOX 6637
SCARBOROUGH ME 04070

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$333.82

3.2372. **Nonpriority creditor's name and mailing address**

THE MARYLAND ZOO IN BALTIMORE
NINA SCHOONOVER STAFF ACCOUNTANT
1876 MANSION HOUSE DR
BALTIMORE MD 21217

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2373. **Nonpriority creditor's name and mailing address**

THE MIRIAM HOSPITAL
P.O. BOX 1202
PROVIDENCE RI 02901-1202

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$972.85

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2374. **Nonpriority creditor's name and mailing address**

THE PEOPLE OF THE STATE OF NEW YORK
CORP COUNSEL
CITY OF NEW YORK
100 CHURCH ST
NEW YORK NY 10007

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2375. **Nonpriority creditor's name and mailing address**

THE PERRIN ASPHALT
AND CONCRETE COMPANY INC.
525 DAN STREET
AKRON OH 44310

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$36,285.00

3.2376. **Nonpriority creditor's name and mailing address**

THE PHILLIPS GROUP
P.O. BOX 61020
HARRISBURG PA 17106-1020

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$264.43

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.2377. Nonpriority creditor's name and mailing address</p> <p>THE PORT AUTHORITY OF NY & NJ VIOLATIONS PROCESSING CENTER PO BOX 15186 ALBANY NY 12212-5186</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$25.00</p>
<p>3.2378. Nonpriority creditor's name and mailing address</p> <p>THE PUBLIC UTILITIES COMMISSION OF OHIO 180 E BROAD ST FOURTH FLOOR COLUMBUS OH 43215</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$100.00</p>
<p>3.2379. Nonpriority creditor's name and mailing address</p> <p>THE SERVICE TEAM, INC. DBA COUNTRY JUNCTION 6565 INTERCHANGE RD LEHIGHTON PA 18235</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$167.48</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2380. Nonpriority creditor's name and mailing address THE SHERWIN WILLIAMS CO 2043 STRINGTOWN ROAD GROVE CITY OH 43123-3605 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$57.84
3.2381. Nonpriority creditor's name and mailing address THE SHERWIN WILLIAMS CO. JUDITH JOHNSON 101 PROSPECT AVE, 720 CLEVELAND OH 44115-1093 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$292.60
3.2382. Nonpriority creditor's name and mailing address THERMAL & PROTECTIVE PACKAGING INC JESSIE ANTONOPOULOS PO BOX 57018 BRAMPTON ON L6Z0E7 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$435.25

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2383. Nonpriority creditor's name and mailing address THERMO FISHER 1 THERMO FISHER PARKWAY OAKWOOD VILLAGE OH 44146-6536 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$4,072.82
3.2384. Nonpriority creditor's name and mailing address THERMO FISHER SCIENT P O BOX 100 RANSOMVILLE NY 14131-0100 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,288.73
3.2385. Nonpriority creditor's name and mailing address THERMO KING-CENTRAL CAROLINAS P O BOX 538509 ATLANTA GA 30353-8509 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,567.47

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2386. Nonpriority creditor's name and mailing address THOMAS JEFFERSON UNIV HOSPITAL IMAGE LIBRARY 132 S 10TH ST, 780-CA PHILADELPHIA PA 19107 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$121.33
3.2387. Nonpriority creditor's name and mailing address THOMAS KILLIAN MAINTENANCE DIRECTOR 44 DONALDSON RD TREMONT PA 17981 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2388. Nonpriority creditor's name and mailing address TIBURON LOCKERS USA INC % NEXTERUS INC 802 FAR HILLS DR NEW FREEDOM PA 17349-8428 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,832.16

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2389. **Nonpriority creditor's name and mailing address**

TIFFANY SHEARS
EMROCH AND KILDORF LLP
3600 WEST BROAD ST
STE 700
RICHMOND VA 23130

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2390. **Nonpriority creditor's name and mailing address**

TIFFIN INSULATORS COMPANY LLC
MARK NASH
981 TYBER RDAD
TIFFIN OH 44883-8673

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$992.56

3.2391. **Nonpriority creditor's name and mailing address**

TIFFIN METAL PRODUCTS
JEFFREY SNAVELY
450 WALL ST
TIFFIN OH 44883-1366

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$1,242.03

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2392. Nonpriority creditor's name and mailing address TILLEY CHEMICAL CO PAIGE EDWARDS 501 CHESAPEAKE PARK PLAZA BALTIMORE MD 21220-4203 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$162.25
3.2393. Nonpriority creditor's name and mailing address TIME WARNER CABLE PO BOX 70872 CHARLOTTE NC 28272-0872 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$139.97
3.2394. Nonpriority creditor's name and mailing address TIME WARNER CABLE OF NYC PO BOX 223085 PITTSBURGH PA 15251-2085 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$757.70

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2395. Nonpriority creditor's name and mailing address TINDEX SALES & MANUFACTURING INC TODD HALPERIN 137 AVENUE LABROSSE POINTE-CLAIRE QC H9R1A3 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2396. Nonpriority creditor's name and mailing address TIOGA COUNTY SANITARY SERVICE 5450 WAITS ROAD OWEGO NY 13827 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$594.00
3.2397. Nonpriority creditor's name and mailing address TIPSY ELVES LLC SHEPPARD MULLIN RICHTER AND HAMPTON LLP TRAVIS J ANDERSON ESQ 12275 EL CAMINO REAL STE 200 SAN DIEGO CA 92130-2006 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL LITIGATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2398. Nonpriority creditor's name and mailing address TITANX % TRANSAVER 108 WASHINGTON ST MANLIUS NY 13104-1913 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$382.83
3.2399. Nonpriority creditor's name and mailing address TNT POWERWASH INC. 3220 TOY ROAD GROVEPORT OH 43125 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$779.00
3.2400. Nonpriority creditor's name and mailing address TOLEDO SPRING 5015 ENTERPRISE BLVD TOLEDO OH 43612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$122.76

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2401. Nonpriority creditor's name and mailing address TOM FORD TOM'S FORD 200 HWY 35 KEYPORT NJ 07735-1422	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$117.29
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2402. Nonpriority creditor's name and mailing address TOMAS AROCHO AND GLORIA COSARE LEVINSON AXELROD PA ERIN M KOLODZIEJCZYK ESQ 2 LINCOLN HIGHWAY PO BOX 2905 EDISON NJ 08818	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: LITIGATION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2403. Nonpriority creditor's name and mailing address TOMS OF MAINE RENEE BERTRAND 2 STORER ST STE 302 KENNEBUNK ME 04043-6883	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,410.56
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2404. Nonpriority creditor's name and mailing address TOMS OF MAINE CLAIMS DEPT 2 STORER ST STE 302 KENNEBUNK ME 04043-6881 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,551.10
3.2405. Nonpriority creditor's name and mailing address TOM'S OF MAINE SUSAN COLUCCI 2 STORER ST, STE 302 KENNEBUNK ME 04043-6883 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,285.58
3.2406. Nonpriority creditor's name and mailing address TONYS TRAILER SERVICE INC 3011 W MORRIS STREET INDIANAPOLIS IN 46241 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,665.32

Debtor **New England Motor Freight, Inc.**

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3.2407. **Nonpriority creditor's name and mailing address**

TOOLS FOR INDUSTRY
CHRIS CARCANO
PO BOX 378
LAKE GROVE NY 11755-0378

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2408. **Nonpriority creditor's name and mailing address**

TOOTSIE ROLL
95 CHASTAIN RD #200
KENNESAW GA 30144-5883

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$128.82

3.2409. **Nonpriority creditor's name and mailing address**

TOP DAWG GROUP, LLC
220 EASTVIEW DR, #103
BROOKLYN HEIGHTS OH 44131

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$5,538.69

Debtor **New England Motor Freight, Inc.**

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3.2410. Nonpriority creditor's name and mailing address TOP NOTCH LOGISTICS STEVE VARSHINE 2834 N HERITAGE ST BUCKEYE AZ 85326 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.2411. Nonpriority creditor's name and mailing address TOPAZ LIGHTING CO MILDRE BOEHNING 925 WAVERLY AVE HOLTSVILLE NY 11742-1109 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$605.25
3.2412. Nonpriority creditor's name and mailing address TOPAZ LIGHTING CO MILDRE BOEHNING 925 WAVERLY AVE HOLTSVILLE NY 11742-1109 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$243.85

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3.2413. Nonpriority creditor's name and mailing address TOP-LINE PROCESS ANDREW MUNCH 21 HUNT ROAD LEWIS RUN PA 16738-9715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$67.39
3.2414. Nonpriority creditor's name and mailing address TOTAL QUALITY LOGISTICS NIKI PHILPOT PO BOX 799 MILFORD OH 45150-0799 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.2415. Nonpriority creditor's name and mailing address TOTAL QUALITY LOGISTICS CRYSTAL STROUD 1701 EDISON DR MILFORD OH 45150-2728 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,462.00

Debtor **New England Motor Freight, Inc.**

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3.2416. Nonpriority creditor's name and mailing address TOTAL QUALITY LOGISTICS INC NIKI PHILPOT PO BOX 799 MILFORD OH 45150-0799 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$295.00
3.2417. Nonpriority creditor's name and mailing address TOWER LABORATORIES STORMY SWANSON PO BOX 306 CENTERBROOK CT 06409-0306 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$119.52
3.2418. Nonpriority creditor's name and mailing address TOWER PAPER CO 1216 BRUNSWICK AVENUE FAR ROCKAWAY NY 11691 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,237.30

Debtor **New England Motor Freight, Inc.**

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3.2419. Nonpriority creditor's name and mailing address TOYOTA MOTOR PO BOX 17651 SAINT LOUIS MO 63178-7651	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$30.35
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.2420. Nonpriority creditor's name and mailing address TOYOTA MOTOR SALES KEITH SCHELL 6710 BAYMEADOW DR GLEN BURNIE MD 21060-6402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,030.72
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2421. Nonpriority creditor's name and mailing address TRACEY CARTO DIVERSIFIED CEILINGS 2121 FRIES MILL RD WILLIAMSTOWN NJ 08094	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2422. Nonpriority creditor's name and mailing address TRAFFIC TECH INC IRENE BOHINC 16711 VOIE DE SERVICE N KIRKLAND QC H9H3L1 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$986.21
3.2423. Nonpriority creditor's name and mailing address TRAFFIC TECH INC MIKE BOIVIN 16711 TRANS CANADA HWY KIRKLAND QC H9H 3L1 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$275.00
3.2424. Nonpriority creditor's name and mailing address TRANSFORCE ATTN: ACCOUNTS RECEIVABLE 5520 CHEROKEE AVE, SUITE 200 ALEXANDRIA VA 22312 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,885.27

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3.2425. Nonpriority creditor's name and mailing address TRANSITOWNE MITSUBISHI CASEY KORTE 7420 TRANSIT RD WILLIAMSVILLE NY 14221-6019 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$524.28
3.2426. Nonpriority creditor's name and mailing address TRANSPORT PLAYERS ALLIANCE TPA JACK CHAMBERS 45 SHREWSBURY DRIVE LIVINGSTON NJ 07039 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$275.30
3.2427. Nonpriority creditor's name and mailing address TRANSPORTATION REPAIR SERV INC 7314 SCHUYLER ROAD E SYRACUSE NY 13057 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,003.39

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<p>3.2428. Nonpriority creditor's name and mailing address</p> <p>TRANZACT TECHNOLOGIES, INC ATTN: 3020 COMMISSION 360 WEST BUTTERFIELD ROAD ELMHURST IL 60126</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$764.78</p>
<p>3.2429. Nonpriority creditor's name and mailing address</p> <p>TRAVELCENTERS OF AMERICA, LLC P O BOX 641906 CINCINNATI OH 45264</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$8,858.96</p>
<p>3.2430. Nonpriority creditor's name and mailing address</p> <p>TRAVELERS C/O BANK OF AMERICA 91287 COLLECTIONS CENTER DRV CHICAGO IL 60693-1287</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$87.00</p>

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3.2431. Nonpriority creditor's name and mailing address TRAVELERS PETE CARELLO ONE TOWER SQUARE MS 07 HARTFORD CT 06183 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2432. Nonpriority creditor's name and mailing address TRAVELERS INDEMNITY CO OF CT ET AL ELLIS BOXER AND BLAKE PLLC STEPHEN ELLIS AND CHRISTINA RAINVILLE ONE LAWSON LANE STE 200H BURLINGTON VT 05401 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2433. Nonpriority creditor's name and mailing address TRAVELERS PERSONAL INS CO AS SUBROGEE OF SHIRLEYAN EBERT PO BOX 5076 HARTFORD CT 06102-5076 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,410.35

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3.2434. Nonpriority creditor's name and mailing address TREASURER STATE OF MAINE PROF & FIN REGULATION-BOILER 35 STATE HOUSE STATION AUGUSTA ME 04333-0035	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$150.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2435. Nonpriority creditor's name and mailing address TREASURER, CHESTERFIELD COUNTY DEPT OF UTILITIES PO BOX 26725 RICHMOND VA 23261-6725	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$786.15
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2436. Nonpriority creditor's name and mailing address TREASURER, CITY OF JAMESTOWN BOARD OF PUBLIC UTILITIES P.O. 700 JAMESTOWN NY 14702-0700	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,316.05
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2437. Nonpriority creditor's name and mailing address TREK BICYCLE TERESA DE BLARE 425 RESORT DR JOHNSON CREEK WI 53038 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$200.00
3.2438. Nonpriority creditor's name and mailing address TRI PAR DIE AND MOLD CORP 670 SUNDOWN RD S.ELGIN IL 60177 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: OPEN AUTO CLAIMS FOR PAYMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2439. Nonpriority creditor's name and mailing address TRI STATE FIRE PROTECTION JUSTIN GARLAND 26 HAMPSHIRE DR HUDSON NH 03051-4922 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$468.00

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3.2440. Nonpriority creditor's name and mailing address TRI STATE TIRE, INC 136 DUDLEY AVE WALLINGFORD CT 06492 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$813.05
3.2441. Nonpriority creditor's name and mailing address TRIANGLE TUBE ATTN: PHIL HORNBERGER 1240 FOREST PARKWAY STE 100 WEST DEPTFORD NJ 08066 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$629.98
3.2442. Nonpriority creditor's name and mailing address TRIANGLE TUBE PHILLIP HORNBERGER 1240 FOREST PKWY STE 10 WEST DEPTFORD NJ 08066 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$109.98

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3.2443. Nonpriority creditor's name and mailing address TRIGLIA TRANSPORTATION CO. P.O. BOX 218 DELMAR DE 19940	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$9,902.73
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2444. Nonpriority creditor's name and mailing address TRI-LIFT INC 1471 JERSEY AVENUE NORTH BRUNSWICK NJ 08902-1622	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$8,759.96
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2445. Nonpriority creditor's name and mailing address TRI-LIFT NC, INC 2905 MANUFACTURERS ROAD GREENSBORO NC 27406	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,364.85
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2446. Nonpriority creditor's name and mailing address TRIMARK UNITED EAST 170 GREENWOOD AVENU 93357335 RUMFORD RI 02916-1937 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$143.35
3.2447. Nonpriority creditor's name and mailing address TRINITAS HOSPITAL OCCUPATIONAL MEDICINE -LOCKBOX #7541 P.O. BOX 8500 PHILADELPHIA PA 19178 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,108.00
3.2448. Nonpriority creditor's name and mailing address TRINITY GLASS INTERNATIONAL SAMANTHA ZAYAS 8014 INDUSTRIAL BLVD STE 200 BREINIGSVILLE PA 18031-1225 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,703.19

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3.2449. Nonpriority creditor's name and mailing address TRINITY GLASS INTERNATIONAL SAMANTHA ZAYAN 33615 1ST WAY SOUTH FEDERAL WAY WA 98003-4558 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,449.91
3.2450. Nonpriority creditor's name and mailing address TRINITY GROUP BOB MILLER 100 BROADWAY STE 147 LYNBROOK NY 11563-5031 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00
3.2451. Nonpriority creditor's name and mailing address TRINITY LOGISTICS BECKIE SAVINO PO BOX 1620 SEAFORD DE 19973-8920 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$598.81

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3.2452. **Nonpriority creditor's name and mailing address**

TRIPLE K FLEET SERVICES, INC
7800 LINGLESTOWN ROAD
HARRISBURG PA 17112

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,161.86

3.2453. **Nonpriority creditor's name and mailing address**

TRI-STATE LOADMASTER, INC.
P.O. BOX 245
DOWNTOWN PA 19335

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,152.05

3.2454. **Nonpriority creditor's name and mailing address**

TROY CHEMICAL
ED STRAUB
8 VREELAND RD
FLORHAM PARK NJ 07932-1501

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$25,000.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2455. **Nonpriority creditor's name and mailing address**

TROY CONTAINER LINE
% CTS
1915 VAUGHN RD
KENNESAW GA 30144-4502

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2456. **Nonpriority creditor's name and mailing address**

TRUCK IT AWAY ASSOC LP
945 SUMMIT AVE
BRONX NY 10452

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2457. **Nonpriority creditor's name and mailing address**

TRUCK TIRE SERVICE CORPORATION
PO BOX 1265
SAUGUS MA 01906-1265

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$65,306.40

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2458. Nonpriority creditor's name and mailing address TRUCKPRO, INC 29787 NETWORK PLACE CHICAGO IL 60673-1284	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$7,319.31
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2459. Nonpriority creditor's name and mailing address TST IMPRESO TJ GOMEZ PO BOX 506 COPPELL TX 75019-0506	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$446.82
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2460. Nonpriority creditor's name and mailing address TSW AUTOMATION, INC 6301 ROBERTSON AVENUE NASHVILLE TN 37209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$82.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2461. Nonpriority creditor's name and mailing address TUMINO'S TOWING, INC 37 EMERSON STREET RIDGEFIELD PARK NJ 07660	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$16,469.08
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2462. Nonpriority creditor's name and mailing address TURKISH AIRLINES JFK AIRPORT JAMAICA NY 11430	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$100.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2463. Nonpriority creditor's name and mailing address TURTLE & HUGHES DANA RAPATSKI 266 OLD NEW BRUNSWICK RD PISCATAWAY NJ 08854-3776	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$250.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2464. Nonpriority creditor's name and mailing address TWIN DATA CORPORATION 623 EAGLE ROCK AVE UNIT 145 WEST ORANGE NJ 07052 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,320.00
3.2465. Nonpriority creditor's name and mailing address U P SPECIAL DELIVERY, INC. PO BOX 78914 MILWAUKEE WI 53278-8914 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$161.20
3.2466. Nonpriority creditor's name and mailing address U.S. DEPT. OF EDUCATION PO BOX 105081 ATLANTA GA 30348-5081 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$377.59

Debtor **New England Motor Freight, Inc.**

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3.2467. Nonpriority creditor's name and mailing address U.S. SECURITY ASSOCIATES, INC PO BOX 931703 ATLANTA GA 31193-0647 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,178.76
3.2468. Nonpriority creditor's name and mailing address U.S. TRUCK PARTS & SERVICE 231 ST NICHOLAS AVE SO PLAINFIELD NJ 07080-1809 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,766.97
3.2469. Nonpriority creditor's name and mailing address UCB LOGISTICS INC 19401 S MAIN ST #102 GARDENA CA 90248 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2470. Nonpriority creditor's name and mailing address UGI UTILITIES, INC PO BOX 15523 WILMINGTON DE 19886-5523 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,318.77
3.2471. Nonpriority creditor's name and mailing address ULINE INC. ATTN:ACCOUNTS RECEIVABLE PO BOX 88741 CHICAGO IL 60680-1741 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$460.60
3.2472. Nonpriority creditor's name and mailing address ULTIMATE PEST CONTROL OF MONROE COUNTY 52A HOLWORTHY STREET ROCHESTER NY 14606 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$183.60

Debtor **New England Motor Freight, Inc.**

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<p>3.2473. Nonpriority creditor's name and mailing address</p> <p>UNICARRIERS AMERICAS CORP. P O BOX 70700 CHICAGO IL 60673-0700</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,264.69</p>
<p>3.2474. Nonpriority creditor's name and mailing address</p> <p>UNIFIED POWER C/O WORLDWIDE EXPRESS 2323 VICTORY AVE DALLAS TX 75219-7657</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$218.52</p>
<p>3.2475. Nonpriority creditor's name and mailing address</p> <p>UNIFIRST CORPORATION PO BOX 650481 DALLAS TX 75265</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$243.72</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2476. Nonpriority creditor's name and mailing address UNIFIRST FIRST AID 4159 SHORELINE DR. ST LOUIS MO 63045	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$292.27
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2477. Nonpriority creditor's name and mailing address UNION HOSPITAL CECIL COUNTY 106 BOW STREET ELKTON, MD 21921	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$477.50
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2478. Nonpriority creditor's name and mailing address UNION PARTNERS LLC % SCHNEIDER LOGISTICS PO BOX 78158 MILWAUKEE WI 53278-8158	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$808.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2479. Nonpriority creditor's name and mailing address UNIQUE EXPEDITERS, INC 147-48 182ND STREET SPRINGFIELD GARDENS NY 11413 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,000.00
3.2480. Nonpriority creditor's name and mailing address UNISHIPPERS P O BOX 6047 KENNEWICK WA 99336-0047 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$189.42
3.2481. Nonpriority creditor's name and mailing address UNISOURCE SHIPPING CLAIMS DEPT 4711 FORT HAMILTON PKWY BROOKLYN NY 11219-2927 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$228.00

Debtor **New England Motor Freight, Inc.**

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3.2482. Nonpriority creditor's name and mailing address UNISOURCE SHIPPING ETSY 4711 FT HAMILTON PKWY BROOKLYN NY 11219-2927 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,261.45
3.2483. Nonpriority creditor's name and mailing address UNISOURCE SHIPPING CONNIE KAFF 4711 FORT HAMILTON PKWY BROOKLYN NY 11219-2927 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,588.30
3.2484. Nonpriority creditor's name and mailing address UNISOURCE SHIPPING BINA 4711 FORT HAMILTON BROOKLYN NY 11219-2927 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$97.58

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2485. Nonpriority creditor's name and mailing address UNITED CITRUS CLARE MARCHESE 185 CONSTITUTION DR TAUNTON MA 02780-7388	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2486. Nonpriority creditor's name and mailing address UNITED GASKET ANDRE HOWARD 1633 SOUTH 55TH AVE CICERO IL 60804-1817	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$6,600.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2487. Nonpriority creditor's name and mailing address UNITED HEALTHCARE 22703 NETWORK PLACE 60673122C0003 CHICAGO IL 60673-1227	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$96,066.67
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2488. Nonpriority creditor's name and mailing address UNITED HEALTHCARE 170 WOOD AVENUE SOUTH ISELIN NJ 08830 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: MEDICAL & PHARMACY CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,500,000.00
3.2489. Nonpriority creditor's name and mailing address UNITED MOTOR PARTS, INC 1130 TEANECK ROAD TEANECK NJ 07666 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,242.72
3.2490. Nonpriority creditor's name and mailing address UNITED STATES FIRE INSURANCE CO 305 MADISON AVE MORRISTOWN NJ 07960 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLES - INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2491. Nonpriority creditor's name and mailing address UNITIL CONCORD ELECTRIC CO. P.O. BOX 981010 BOSTON MA 02298-1010 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,253.46
3.2492. Nonpriority creditor's name and mailing address UNIVERSAL SHIPPING COMPANY ERIK ARUTINNOV 2615 E 63RD ST BROOKLYN NY 11234-6811 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$642.25
3.2493. Nonpriority creditor's name and mailing address UNIVERSAL TRAFFIC PO BOX 888470 GRAND RAPIDS MI 49588-8470 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$89.67

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

<p>3.2494. Nonpriority creditor's name and mailing address</p> <p>UNIVERSAL TRAFFIC SERVICE RENEE ANTHONY PO BOX 888470 GRAND RAPIDS MI 49588-8470</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$3,936.38</p>
<p>3.2495. Nonpriority creditor's name and mailing address</p> <p>UNIVERSITY WIRE CO 198 FENWICK DR PORT MATILDA PA 16870-7533</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OVERCHARGE CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$73.00</p>
<p>3.2496. Nonpriority creditor's name and mailing address</p> <p>UNKNOWN 375 BOG HOLLOW RD WASSAIC NY 12592</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>OPEN AUTO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>UNDETERMINED</p>

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2497. Nonpriority creditor's name and mailing address UNYSON LOGISTICS ASHLEY HUCK 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-2494 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$109.80
3.2498. Nonpriority creditor's name and mailing address UNYSON LOGISTICS BRITTANY JONES ASHLEY HUCK 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-6711 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$597.80
3.2499. Nonpriority creditor's name and mailing address UNYSON LOGISTICS ASHLEY MULLIS 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-1005 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,958.91

Debtor **New England Motor Freight, Inc.**

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3.2500. Nonpriority creditor's name and mailing address UNYSON LOGISTICS CHRIS RESIMIUS 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-1145 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,780.98
3.2501. Nonpriority creditor's name and mailing address UNYSON LOGISTICS CHRISTOPHER RESIMIUS 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-2318 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,941.90
3.2502. Nonpriority creditor's name and mailing address UNYSON LOGISTICS JAMES SCHWARBER 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-1145 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,427.04

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<p>3.2503. Nonpriority creditor's name and mailing address</p> <p>UNYSON LOGISTICS RAYMOND LAMADRID 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$8,510.67</p>
<p>3.2504. Nonpriority creditor's name and mailing address</p> <p>UNYSON LOGISTICS KEVIN PETTERSON 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-1145</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$10,066.95</p>
<p>3.2505. Nonpriority creditor's name and mailing address</p> <p>UNYSON LOGISTICS KATHLEEN CONRAD 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$10,892.63</p>

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3.2506. Nonpriority creditor's name and mailing address UNYSON LOGISTICS BRITTANY JONES 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,629.02
3.2507. Nonpriority creditor's name and mailing address UNYSON LOGISTICS MATTHEW STAEBEL 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,773.14
3.2508. Nonpriority creditor's name and mailing address UNYSON LOGISTICS SAMANTHA DEEN 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$19,202.62

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3.2509. Nonpriority creditor's name and mailing address UNYSON LOGISTICS REBECCA MC COY 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141-2116 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$41,418.05
3.2510. Nonpriority creditor's name and mailing address UNYSON LOGISTICS CONNIE NAVARRETE 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$57,134.78
3.2511. Nonpriority creditor's name and mailing address UNYSON LOGISTICS DETRICA DALE 1801 PARK 270 DR STE 500 SAINT LOUIS MO 63141 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$62,152.54

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3.2512. Nonpriority creditor's name and mailing address UNYSON LOGISTICS J SCHWARBER/SAMANTHA DEEN 1801 PARK 270 DR , STE 500 SAINT LOUIS MO 63141 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,026.79
3.2513. Nonpriority creditor's name and mailing address UPS PO BOX 7247-0244 PHILADELPHIA PA 19170-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$531.85
3.2514. Nonpriority creditor's name and mailing address UPS CARGO CLAIMS ACCOUNTING ACCOUNTING 700 KEYSTONE INDUSTRIAL DUNMORE PA 18512 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,139.27

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<p>3.2515. Nonpriority creditor's name and mailing address</p> <p>UPSCIA CARGO CLAIMS SUBROGATE CLAIMS DEPT PO BOX 100458 FORT WORTH TX 76185-0458</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$232.82</p>
<p>3.2516. Nonpriority creditor's name and mailing address</p> <p>UREIGHTQUOTE.COM RANDI FRUMP PO BOX 7001 OVERLAND PARK KS 66207-0001</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$6,598.85</p>
<p>3.2517. Nonpriority creditor's name and mailing address</p> <p>US NONWOVENS CARGO CLAIMS 360 MORELAND RD COMMACK NY 11725-5707</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,684.00</p>

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3.2518. Nonpriority creditor's name and mailing address USA BLUEBOOK MARNIKA GORDON 3781 BURWOOD DR WAUKEGAN IL 60085-9101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$429.05
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2519. Nonpriority creditor's name and mailing address USAA INS CO CHAD SMITH SUBRO DEPT PO BOX 659476 SAN ANTONIO TX 78265	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2520. Nonpriority creditor's name and mailing address USAA INS CO KIMBERLY MENCHACA PO BOX 33490 SAN ANTONIO TX 78265	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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<p>3.2521. Nonpriority creditor's name and mailing address</p> <p>V.A.G., INC. 7460 LANCASTER PIKE SUITE 4 HOCKESSIN DE 19707</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$37,564.12</p>
<p>3.2522. Nonpriority creditor's name and mailing address</p> <p>VA BIEN INTERNATIONAL INC STATE ROAD 156 HC2 BOX 12193 STATE RD 156 KM 52.5 AGUAS BUENAS PR 00703</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$1,824.00</p>
<p>3.2523. Nonpriority creditor's name and mailing address</p> <p>VALENZANO WINERY LLC MARK VALENZANO 1090 RT 206 SHAMONG NJ 08088-9599</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$5,365.47</p>

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3.2524. Nonpriority creditor's name and mailing address VALLEY HINO TRUCK INC DBA VALLEY ISUZU TRUCK 5025 GATEWAY DRIVE MEDINA OH 44256 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$680.13
3.2525. Nonpriority creditor's name and mailing address VALLEY TIRE INC 4401 STOUTFIELD S DR INDIANAPOLIS IN 46241 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$560.95
3.2526. Nonpriority creditor's name and mailing address VALLEY TRUCK & TRAILER 409 STRUBLE ROAD STATE COLLEGE PA 16801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$319.06

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3.2527. Nonpriority creditor's name and mailing address VALUE DRUGS CASEY HAGGERTY 106 BROADWAY GREENLAWN NY 11740-1310 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$77.08
3.2528. Nonpriority creditor's name and mailing address VALVOLINE LLC TRANSAUDIT STE 2D 11 MARSHALL RD WAPPINGERS FALLS NY 12590-4132 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$426.20
3.2529. Nonpriority creditor's name and mailing address VALVOLINE LLC P O BOX 360155 PITTSBURGH PA 15251-6155 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$42,787.67

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3.2530. Nonpriority creditor's name and mailing address VAN AUKEN EXPRESS, INC. PO BOX 339 GREENVILLE NY 12083 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,775.25
3.2531. Nonpriority creditor's name and mailing address VAN EERDEN TRUCKING, CO. 10299 SOUTHKENT DR SW BYRON CENTER MI 49315 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$172.15
3.2532. Nonpriority creditor's name and mailing address VANGUARD % C T S 1915 VAUGHN RD KENNESAW GA 30144 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$661.88

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3.2533. **Nonpriority creditor's name and mailing address**

VASQUEZ*ALBERT
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2534. **Nonpriority creditor's name and mailing address**

VELCRO
P O BOX 4316
FALL RIVER MA 02723-0415

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

OVERCHARGE CLAIMS

Is the claim subject to offset?

- ☐ No
☒ Yes

Amount of claim

\$38.78

3.2535. **Nonpriority creditor's name and mailing address**

VELUX AMERICA INC
KAREN AVERILL
754 RAINBOW RD STE A
WINDSOR CT 06095-1004

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

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3.2536. Nonpriority creditor's name and mailing address VERITIV P O BOX 419259 KANSAS CITY MO 64161 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$265.55
3.2537. Nonpriority creditor's name and mailing address VERIZON PO BOX 15124 ALBANY NY 12212-5124 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$541.70
3.2538. Nonpriority creditor's name and mailing address VERIZON P.O. BOX 4830 TRENTON NJ 08650-4830 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$181.57

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3.2539. Nonpriority creditor's name and mailing address VERIZON P.O. BOX 4833 TRENTON NJ 08650-4833	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$777.75
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2540. Nonpriority creditor's name and mailing address VERIZON CMR CLAIMS DEPT PO BOX 60553 OKLAHOMA CITY OK 73146	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2541. Nonpriority creditor's name and mailing address VERIZON WIRELESS PO BOX 408 NEWARK NJ 07101-0408	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$915.17
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2542. Nonpriority creditor's name and mailing address VERMONT GAS SYSTEMS INC. PAYMENT PROCESSING CENTER P O BOX 22082 ALBANY NY 12201-2082 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,587.69
3.2543. Nonpriority creditor's name and mailing address VERTEX CHINA Q.THOMPSON 1793 WEST 2ND ST POMONA CA 91766-1253 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$164.86
3.2544. Nonpriority creditor's name and mailing address VERTIV SHANE GALLAGHER 610 EXECUTIVE CAMPUS DR WESTERVILLE OH 43082-8870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,265.10

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3.2545. Nonpriority creditor's name and mailing address VERTIV DATA 2 12631 WESTLINKS DR FORT MYERS FL 33913-8627 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$7,900.16
3.2546. Nonpriority creditor's name and mailing address VERTIV 12631 WESTLINKS DR FORT MYERS FL 33913-8627 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,379.31
3.2547. Nonpriority creditor's name and mailing address VESTIL MANUFACTURING CHELSEA POWELL 900 GROWTH PKWY ANGOLA IN 46703-9338 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,795.10

Debtor **New England Motor Freight, Inc.**

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3.2548. Nonpriority creditor's name and mailing address VETS CHOICE RAYMOND VACANTI 90 MARCUS BLVD DEER PARK NY 11729-4502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$240.00
3.2549. Nonpriority creditor's name and mailing address VIAINT-SAN ANTONIO 10739 DEERWOOD PARK BLVD R2 LOGISTICS INC SAN ANTONIO TX 78239 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,260.00
3.2550. Nonpriority creditor's name and mailing address VICTORY INTERNATIONAL USA LLC KYLE MONGA 40 CHRISTOPHER WAY EATONTOWN NJ 07724-3327 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,293.00

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<p>3.2551. Nonpriority creditor's name and mailing address</p> <p>VIKING TERMITE & PEST CONTROL P.O. BOX 4070 WARREN NJ 07059</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$357.23</p>
<p>3.2552. Nonpriority creditor's name and mailing address</p> <p>VILLAGE CANDLE DIANE LEVESQUE 90 SPENCER DR WELLS ME 04090-5548</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>CARGO CLAIMS</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$5,023.89</p>
<p>3.2553. Nonpriority creditor's name and mailing address</p> <p>VILLAGE OF GLENDALE HEIGHTS 300 CIVIC CENTER PLAZA GLENDALE HEIGHTS IL 60139</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>ACCOUNTS PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Amount of claim</p> <p>\$70.00</p>

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3.2554. Nonpriority creditor's name and mailing address VIN WORLDWIDE % CTS 1915 VAUGHN RD KENNESAW GA 30144-4502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,862.46
3.2555. Nonpriority creditor's name and mailing address VIRGINIA ARTESIAN BOTTLING COMPANY NICK BROWN 4300 SPRING RUN RD MECHANICSVILLE VA 23116-6639 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$898.56
3.2556. Nonpriority creditor's name and mailing address VIRGINIA TODD ATTN VIRGINIA TODD 6411 LAKEWAY DR OREGON OH 43616-4445 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$250.00

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3.2557. Nonpriority creditor's name and mailing address VIRTUAL FREIGHT INSPECTIONS PO BOX 1106 MENOMONEE FALLS WI 53052-1106 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$283.00
3.2558. Nonpriority creditor's name and mailing address VISTA UNDERWRITING PARTNERS 1400 N PROVIDENCE RD BUILDING 2 SUITE 4050 MEDIA PA 19063 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,031.59
3.2559. Nonpriority creditor's name and mailing address VITAMIN WORLD % DHL 570 POLARIS PKWY DEPT 220 WESTERVILLE OH 43082-7900 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,159.47

Debtor **New England Motor Freight, Inc.**

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3.2560. **Nonpriority creditor's name and mailing address**

VITEC VIEDO COM
LOCKBOX 75040
CHARLOTTE NC 28275-0040

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

OPEN AUTO CLAIMS FOR PAYMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2561. **Nonpriority creditor's name and mailing address**

VOLK PACKAGING CORP
11MORIN ST
BIDDEFORD ME 04005

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2562. **Nonpriority creditor's name and mailing address**

VORTEK INTERNATIONAL
19 GREENTREE LN
CHESTER NY 10918-4024

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$4,100.76

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3.2563. **Nonpriority creditor's name and mailing address**

VOTEE*BRIAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2564. **Nonpriority creditor's name and mailing address**

VP SUPPLY CORPORATION
CHRIS BAKER
3445 WINTON RD
ROCHESTER NY 14623-2950

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$800.14

3.2565. **Nonpriority creditor's name and mailing address**

W N A COMET EAST INC
IGOR SHEVCHENKO
6 STUART ROAD
CHELMSFORD MA 01824-4108

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$731.65

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3.2566. Nonpriority creditor's name and mailing address W.B. MASON PO BOX 981101 BOSTON MA 02298-1101 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,115.60
3.2567. Nonpriority creditor's name and mailing address W.W. GRAINGER, INC. DEPT. 806879698 PALATINE IL 60038-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$493.52
3.2568. Nonpriority creditor's name and mailing address WAC LIGHTING NINA CHOU 44 HARBOR PARK DR PORT WASHINGTON NY 11050-4652 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$159.80

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3.2569. Nonpriority creditor's name and mailing address WAGON MASTERS, INC PO BOX 1390 SCARBOROUGH ME 04070-1390	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,710.66
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2570. Nonpriority creditor's name and mailing address WALDEMAR ADAMCZYK 2505 SALMON ST PHILADELPHIA PA 19125	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$141.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2571. Nonpriority creditor's name and mailing address WALLACE COMP SERVICE CONDATA GLOBAL 9830 WEST 190TH ST STE M MOKENA IL 60448-5603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$121.48
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	

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3.2572. Nonpriority creditor's name and mailing address WALLACE COMPUTER CONDATA 9830 W 190TH ST STE M MOKENA IL 60448	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$84.70
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.2573. Nonpriority creditor's name and mailing address WALLACE EANNACE % FLI INC 12980 METCALF AVE STE 240 OVERLAND PARK KS 66213-2707	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$2,932.50
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2574. Nonpriority creditor's name and mailing address WALMART STORES ELIZABETH SANTOS 300 VETERANS DR TOBYHANNA PA 18466-8982	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$38.40
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2575. Nonpriority creditor's name and mailing address WALMART STORES ARLENE BEARD 6004 WALTON WAY MOUNT CRAWFORD VA 22841 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$348.96
3.2576. Nonpriority creditor's name and mailing address WAL-MART STORES ARLENE BEARD 6004 WALTON WAY MOUNT CRAWFORD VA 22841 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,058.30
3.2577. Nonpriority creditor's name and mailing address WAL-MART STORES CLAIMS DEPT 1301 SE 10TH ST BENTONVILLE AR 72716-0560 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$995.52

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3.2578. Nonpriority creditor's name and mailing address WARD GREENBERG HELLER & RELDY 1800 BAUSCH & LOMB PLACE ROCHESTER NY 14604-2713 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,736.64
3.2579. Nonpriority creditor's name and mailing address WAREHOUSE SERVICES NO 4, LLC PO BOX 608 MT VERNON IN 47620 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,587.50
3.2580. Nonpriority creditor's name and mailing address WARREN TIRE, INC. 420 BROADWAY PAWTUCKET RI 02861 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$30.09

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3.2581. Nonpriority creditor's name and mailing address WASSERSTROM COMPANY CLAIMS DEPT PO BOX 182056 COLUMBUS OH 43218-2056 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,926.85
3.2582. Nonpriority creditor's name and mailing address WASSERSTROM COMPANY+ CLAIMS DEPT PO BOX 182056 COLUMBUS OH 43218-2056 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$426.50
3.2583. Nonpriority creditor's name and mailing address WATSON INC OTILIO PEREZ COLON 301 HEFFERNAN DRIVE WEST HAVEN CT 06516-4151 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,405.92

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3.2584. **Nonpriority creditor's name and mailing address**

WAYFAIR
CHRIS CARPENTER
4 COPLEY PL FL 7
BOSTON MA 02116-6504

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2585. **Nonpriority creditor's name and mailing address**

WAYFAIR
MATTHEW LITTLE
4 COPLEY PL FL 7
BOSTON MA 02116-6504

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2586. **Nonpriority creditor's name and mailing address**

WAYFAIR
SHANNON QUINN
4 COPLEY PL FL 7
BOSTON MA 02116-6504

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

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3.2587. Nonpriority creditor's name and mailing address WAYFAIR MATTHEW LITTLE 4 COPLEY PL FLR 7 BOSTON MA 02116-6504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2588. Nonpriority creditor's name and mailing address WAYFAIR CODY CONNELLY 4 COPLEY PL FL 7 BOSTON MA 02116-6504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,013.90
3.2589. Nonpriority creditor's name and mailing address WAYFAIR PAULINE PAPANIKOLAOU 4 COPLEY PL FL 7 BOSTON MA 02116-6504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,422.19

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3.2590. Nonpriority creditor's name and mailing address WAYFAIR ASHLEY SHI/CODY CONNELLY 4 COPLEY PLACE FLR 7 BOSTON MA 02116-6504	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$21,786.60
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2591. Nonpriority creditor's name and mailing address WAYNE LARNED 55 KILLDEER ROAD WARWICK RI 02888	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$197.37
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2592. Nonpriority creditor's name and mailing address WD-40 %UNYSON LOGISTICS P O BOX 7047 DOWNERS GROVE IL 60515-7093	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$5,114.88
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.2593. Nonpriority creditor's name and mailing address WE CORK % WORLDWIDE EXPRESS 2323 VICTORY AVE STE 1600 DALLAS TX 75219-7657 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$314.37
3.2594. Nonpriority creditor's name and mailing address WEBBS WATER GARDENS MIKE WEBB 6200 DAYS COVE RD STE 6 WHITE MARSH MD 21162-1204 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$788.58
3.2595. Nonpriority creditor's name and mailing address WEIS TRUCK & TRAILER REPAIR 1600 LEXINGTON AVE ROCHESTER NY 14606 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,597.77

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2596. **Nonpriority creditor's name and mailing address**

WEISS*ROLF
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2597. **Nonpriority creditor's name and mailing address**

WEISS-ROHLIG USA LLC
LAUREN COGLIOZ
1601 ESTES AVE
ELK GROVE VILLAGE IL 60007-5409

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$257.60

3.2598. **Nonpriority creditor's name and mailing address**

WELCH ALLYN
JOSH STUPER
4341 STATE ST RDT RD
SKANEATELES FALLS NY 13153-5301

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$219.20

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2599. Nonpriority creditor's name and mailing address WELCH ALLYN STEPHANIE VALENTINE 4341 STATE ST RD SKANEATELES FALLS NY 13153-5300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,235.60
3.2600. Nonpriority creditor's name and mailing address WELCH ALLYN STEPHANIE VALENTINE 4341 STATE STREET RD SKANEATELES FALLS NY 13153-5300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,451.17
3.2601. Nonpriority creditor's name and mailing address WELCH ALLYN JOSHUA STUPER 4341 STATE ST RD SKANEATELES FALLS NY 13153-5300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,979.00

Debtor **New England Motor Freight, Inc.**

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3.2602. Nonpriority creditor's name and mailing address WELCH ALLYN CLAIMS DEPT 6950 CREDITVIEW RD UNIT 4 MISSISSAUGA ON L5N0A6 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,202.29
3.2603. Nonpriority creditor's name and mailing address WELCH ALLYN CHRISTY LEUBNER 4341 STATE ST RD SKANEATELES FALLS NY 13153-5300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,250.93
3.2604. Nonpriority creditor's name and mailing address WELCH ALLYN INC JOSHUA STUPER/C LEUBNER 4341 STATE ST RD SKANEATELES FALLS NY 13153-5300 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$689.81

Debtor **New England Motor Freight, Inc.**

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3.2605. Nonpriority creditor's name and mailing address WELCH'S NORTH EAST P % MODE TRANSPORTATION 1435 54TH ST #A COLUMBUS GA 31904 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15.00
3.2606. Nonpriority creditor's name and mailing address WELLS FARGO EQUIPMENT FINANCE INC 733 MARQUETTE AVE STE 700 MINNEAPOLIS MN 55402 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GUARANTEE OF LOAN Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$0.00
3.2607. Nonpriority creditor's name and mailing address WEST END POWER EQUIP CO INC JOHN DEERE DEALER 56 BEAVER BROOK RD DANBURY CT 06810-6239 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

3.2608. Nonpriority creditor's name and mailing address WEST PENN POWER PO BOX 3687 AKRON OH 44309-3687 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,080.38
3.2609. Nonpriority creditor's name and mailing address WESTERN REGIONAL DELIVERY SERVICE YVONNE SERRANO 1424 S RAYMOND AVE FULLERTON CA 92831-5235 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$564.00
3.2610. Nonpriority creditor's name and mailing address WESTERN REGIONAL DELIVERY SERVICE SHERRY NAVARRO 1424 S RAYMOND AVE FULLERTON CA 92831-5235 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,040.40

Debtor **New England Motor Freight, Inc.**

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3.2611. Nonpriority creditor's name and mailing address WESTERN VIRGINIA WATER AUTHORITY P O BOX 17381 BALTIMORE MD 21297-1381 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$292.01
3.2612. Nonpriority creditor's name and mailing address WHITE*REGINALD Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2613. Nonpriority creditor's name and mailing address WHITED FORD TRUCK CENTER INC 207 PERRY ROAD BANGOR ME 04401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$619.99

Debtor **New England Motor Freight, Inc.**

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3.2614. Nonpriority creditor's name and mailing address WHITEROSE FREIGHT LLC P O BOX 191153 BROOKLYN NY 11219-7153 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$23.00
3.2615. Nonpriority creditor's name and mailing address WIADERSKI*WOJTEK Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2616. Nonpriority creditor's name and mailing address WICHELIN NORTH AMERICA CLAIMS DEPT PO BOX 100860 ATLANTA GA 30384-0860 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$265.08

Debtor **New England Motor Freight, Inc.**

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3.2617. Nonpriority creditor's name and mailing address WICKETT & CRAIG 120 COOPER RD CURWENSVILLE PA 16833-1542	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$70.00
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.2618. Nonpriority creditor's name and mailing address WIESE USA, INC P O BOX 60106 ST LOUIS MO 63160	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$359.28
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2619. Nonpriority creditor's name and mailing address WILBER AND ASSOCIATES PC 210 LANDMARK DR NORMAL IL 61761	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred _____	Basis for the claim: OPEN AUTO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2620. Nonpriority creditor's name and mailing address WILD MEADOW FARMS DAWN CLINTON 101 W MAIN ST UNIT D SALUNGA PA 17538-1109 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,242.00
3.2621. Nonpriority creditor's name and mailing address WILHOIT*LYNDON Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2622. Nonpriority creditor's name and mailing address WILLETT*SEAN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2623. **Nonpriority creditor's name and mailing address**

WILLIAM ESFORD
YEAROUT AND TRAYLOR PC
WILLIAM P TAYLOR III ESQ
3300 CAHABA RD
STE 35223
BIRMINGHAM AL 35223

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

SETTLEMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$287,000.00

3.2624. **Nonpriority creditor's name and mailing address**

WILLIAM OUTLAW
6028 N BROAD STREET
PHILADELPHIA PA 19141

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

SETTLEMENT

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$15,000.00

3.2625. **Nonpriority creditor's name and mailing address**

WILLIAM R GOLDMAN
ATTN: WILLIAM R GOLDMAN
463 STATE ROUTE 208
NEW PALTZ NY 12561-2631

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$10.00

Debtor **New England Motor Freight, Inc.**

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3.2626. **Nonpriority creditor's name and mailing address**

WILLIAMS*DAVID
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2627. **Nonpriority creditor's name and mailing address**

WILSON PARTITIONS
C/O WORLDWIDE EXPRESS
2323 VICTORY AVE STE 16
DALLAS TX 75219-7657

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$75.00

3.2628. **Nonpriority creditor's name and mailing address**

WILSON*ESHAN
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2629. **Nonpriority creditor's name and mailing address**

WILSON*JAMES
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2630. **Nonpriority creditor's name and mailing address**

WINDMILL HEALTH PRODUCTS
YULIYA KLIMOVA
10 HENDERSON DR
WEST CALDWELL NJ 07006-6608

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$11,901.92

3.2631. **Nonpriority creditor's name and mailing address**

WINDOW TECH SYSTEMS
TRACY CARPENTER
15 OLD STONEBREAK RD
MALTA NY 12020-4900

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$660.41

Debtor **New England Motor Freight, Inc.**

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3.2632. Nonpriority creditor's name and mailing address WINDSTREAM PO BOX 9001908 LOUISVILLE KY 40290-1908	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$177.01
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2633. Nonpriority creditor's name and mailing address WINDWARD TRADING COMPANY VIRGINIA DAHER 12570 ALLENDALE CIR FORT MYERS FL 33912-4678	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$122.35
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2634. Nonpriority creditor's name and mailing address WINFREYS FUDGE INC MARK WINFREY 40 NEWBURYPORT TPK ROWLEY MA 01969-2106	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$5,580.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2635. Nonpriority creditor's name and mailing address WINGS WORLDWIDE STEPHANIE ISRAEL 210 SUMMIT AVENUE #A1 MONTVALE NJ 07645-1579 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$282.36
3.2636. Nonpriority creditor's name and mailing address WINSUPPLY % ODW LOGISTICS 345 HIGH ST STE 600 HAMILTON OH 45011-6072 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,980.81
3.2637. Nonpriority creditor's name and mailing address WITHUMSMITH & BROWN, PC P O BOX 5340 PRINCETON NJ 08543 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,964.73

Debtor **New England Motor Freight, Inc.**

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3.2638. Nonpriority creditor's name and mailing address WNA COMET EAST INC IGOR SHEVCHENKO 6 STUART RD CHELMSFORD MA 01824-4108 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,307.64
3.2639. Nonpriority creditor's name and mailing address WOOD COUNTY IMPLEMENT JOHN DEERE DEALER 13051 KRAMER RD BOWLING GREEN OH 43402 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$355.03
3.2640. Nonpriority creditor's name and mailing address WOOD PRO INC MICHAEL BENVENUTI 421 WASHINGTON ST AUBURN MA 01501-3233 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$354.90

Debtor **New England Motor Freight, Inc.**

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3.2641. Nonpriority creditor's name and mailing address WOODS SERVICE CENTERS, INC 418 WASHINGTON AVENUE VINTON VA 24179 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$750.00
3.2642. Nonpriority creditor's name and mailing address WOODSTREAM CORPORATION BETHANY LIGHT 69 N LOCUST ST LITITZ PA 17543-1714 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,818.98
3.2643. Nonpriority creditor's name and mailing address WORKPLACE SYSTEMS IN 562 MAMMOTH RD LONDONDERRY NH 03053-2101 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$28.53

Debtor **New England Motor Freight, Inc.**

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3.2644. Nonpriority creditor's name and mailing address WORLDWIDE EXPRESS MICHELLE POINDEXTER 19015 PERRY HWY MARS PA 16046-9401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$250.00
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2645. Nonpriority creditor's name and mailing address WORLDWIDE EXPRESS 1200 FULLER RD LINDEN NJ 07036-5774	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$1,272.97
Date or dates debt was incurred VARIOUS	Basis for the claim: OVERCHARGE CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3.2646. Nonpriority creditor's name and mailing address WORLDWIDE EXPRESS 2323 VICTORY AVE ,SUITE 1600 DALLAS TX 75219-7657	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$144.95
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2647. Nonpriority creditor's name and mailing address WORLDWIDE EXPRESS 19015 PERRY HWY MARS PA 16046-9401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$315.18
3.2648. Nonpriority creditor's name and mailing address WORLDWIDE EXPRESS PAUL CASTELLANI 6 WILKENS DR STE 103 PLAINVILLE MA 02762-5019 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50.00
3.2649. Nonpriority creditor's name and mailing address WORTHEN INDUSTRIES TABS 3 E SPLIT ROCK RD NASHUA NH 03060 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$2,238.34

Debtor **New England Motor Freight, Inc.**

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3.2650. Nonpriority creditor's name and mailing address WORTHEN INDUSTRIES TABS 617-889-1145 4105 CASTLEWOOD RD RICHMOND VA 23234-2707 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: OVERCHARGE CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$571.80
3.2651. Nonpriority creditor's name and mailing address WOW USA INC LISA GENAO 9408 GUNSTON COVE RD STE C-D LORTON VA 22079-2302 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$142.32
3.2652. Nonpriority creditor's name and mailing address WRIGHT*CLEVELAND Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2653. **Nonpriority creditor's name and mailing address**

WRIGHT*PATRICK
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2654. **Nonpriority creditor's name and mailing address**

WURTH BAER SUPPLY
CLAIMS DEPT
909 FOREST EDGE DR
VERNON HILLS IL 60061-3106

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$191.70

3.2655. **Nonpriority creditor's name and mailing address**

WURTH USA, INC
PO BOX 415889
BOSTON MA 02241-5889

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

ACCOUNTS PAYABLE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$2,075.76

Debtor **New England Motor Freight, Inc.**

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3.2656. Nonpriority creditor's name and mailing address WUSTHOF TRIDENT BRIAN HAMRICK 355 WILSON AVE NORWALK CT 06854-4616	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$188.50
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2657. Nonpriority creditor's name and mailing address XPEDX TINA BONDS 2201 REEVES RD STE 106 PLAINFIELD IN 46168-5683	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$163.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2658. Nonpriority creditor's name and mailing address XPO LOGISTICS LLC ATTN: LISA MOORE PO BOX 5159 PORTLAND OR 97208-5159	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$3,606.79
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2659. Nonpriority creditor's name and mailing address XRS CORPORATION PO BOX 847170 DALLAS TX 75284-7170	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$54,348.00
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2660. Nonpriority creditor's name and mailing address XYNYTH MANUFACTURING CORPORATION % SCHNEIDER LOGISTICS PO BOX 78158 MILWAUKEE WI 53278-8158	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
Date or dates debt was incurred VARIOUS	Basis for the claim: CARGO CLAIMS	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2661. Nonpriority creditor's name and mailing address YANDOW SALES & SERVICE PO BOX 119 NORTH FERRISBURG VT 05473-0119	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$55.92
Date or dates debt was incurred VARIOUS	Basis for the claim: ACCOUNTS PAYABLE	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **New England Motor Freight, Inc.**

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3.2662. Nonpriority creditor's name and mailing address YARD TRUCK SPECIALIST, INC 1510 FORD ROAD PO BOX 421 BENSALEM PA 19020 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,280.67
3.2663. Nonpriority creditor's name and mailing address YELLOW DOG REPORTS P.O. BOX 879 ROYSE CITY TX 75189 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCOUNTS PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$426.40
3.2664. Nonpriority creditor's name and mailing address YEOMANS*JOHN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2665. Nonpriority creditor's name and mailing address YORK RISK SERVICES GROUP % ECHO GLOBAL 600 W CHICAGO AVE STE 725 CHICAGO IL 60654-2801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,788.32
3.2666. Nonpriority creditor's name and mailing address YUNG-KO TRANS CO LTD SORA CHOI 1224 MILL ST BLDG B EAST BERLIN CT 06023-1159 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,587.76
3.2667. Nonpriority creditor's name and mailing address YUSKO*RAYMOND Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2668. **Nonpriority creditor's name and mailing address**

ZACHARY BALTZ V NEW ENGLAND MOTOR
FREIGHT INC
WILLIAM CAPPUCCINO
9 CRANBERRY DR
TINTON FALLS NJ 07753

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

LITIGATION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2669. **Nonpriority creditor's name and mailing address**

ZACHARY W. COHEN 2000 SUBTRUST U/W/O
JON SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

INSIDER PAYABLE

Is the claim subject to offset?

- ☐ No
☐ Yes

Amount of claim

\$17,581.00

3.2670. **Nonpriority creditor's name and mailing address**

ZEHRA ABBAS
374 OAK TREE CT
HOFFMAN ESTATES IL 60169

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

OPEN AUTO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**

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3.2671. Nonpriority creditor's name and mailing address ZENITH PRODUCTS CORP CRYSTAL NEAL 400 LUKENS DR NEW CASTLE DE 19720-2728 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$846.90
3.2672. Nonpriority creditor's name and mailing address ZIMMERMAN*MICHAEL Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PENDING WORKERS' COMPENSATION CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.2673. Nonpriority creditor's name and mailing address ZIPLINE LOGISTICS LLC JON BUTLER 2300 W 5TH AVE STE 100 COLUMBUS OH 43215-1003 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CARGO CLAIMS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,224.37

Debtor **New England Motor Freight, Inc.**

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3.2674. **Nonpriority creditor's name and mailing address**

ZUCCONI, MARK
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.2675. **Nonpriority creditor's name and mailing address**

ZUCKERMAN HONICKMAN
RICHARD EVANS
191 S GULPH ROAD
KING OF PRUSSIA PA 19406-3103

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

CARGO CLAIMS

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

\$3,377.97

3.2676. **Nonpriority creditor's name and mailing address**

ZUREK, WILLIAM
Address Intentionally Omitted

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

PENDING WORKERS' COMPENSATION
CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **New England Motor Freight, Inc.**Case number (if known) **19-12809****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
BANILOV AND ASSOCIATES NICK BANILOV ESQ 2566 86TH ST STE 5315 BROOKLYN NY 11214	Part 2 line 3.1298	_____
BENESCH FRIEDLANDER COPLAN & ARONOFF LLP KEVIN M CAPUZZI CONTINENTAL PLAZA II 411 HACKENSACK AVE.,3RD FLOOR HACKENSACK NJ 07601-6323	Part 2 line 3.112	_____
BENESCH FRIEDLANDER COPLAN & ARONOFF LLP KEVIN M CAPUZZI CONTINENTAL PLAZA II 411 HACKENSACK AVE.,3RD FLOOR HACKENSACK NJ 07601-6323	Part 2 line 3.113	_____
BENESCH FRIEDLANDER COPLAN & ARONOFF LLP KEVIN M CAPUZZI CONTINENTAL PLAZA II 411 HACKENSACK AVE.,3RD FLOOR HACKENSACK NJ 07601-6323	Part 2 line 3.114	_____
BENESCH FRIEDLANDER COPLAN & ARONOFF LLP KEVIN M CAPUZZI CONTINENTAL PLAZA II 411 HACKENSACK AVE.,3RD FLOOR HACKENSACK NJ 07601-6323	Part 2 line 3.115	_____
CAPITAL ONE ROBERT HARVEY 499 THORNAL ST 11TH FLOOR EDISON NJ 08837	Part 2 line 3.381	_____
CAPITAL ONE ROBERT HARVEY 499 THORNAL ST 11TH FLOOR EDISON NJ 08837	Part 2 line 3.382	_____
COLE SCHOTZ PC MICHAEL D SIROTA,ESQ COURT PLAZA NORTH 25 MAIN ST HACKENSACK NJ 07601	Part 2 line 3.1037	_____
COLE SCHOTZ PC JACOB S FRUMKIN,ESQ COURT PLAZA NORTH 25 MAIN ST HACKENSACK NJ 07601	Part 2 line 3.1037	_____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

CONNELL FOLEY LLP
ROBERT K SCHEINBAUM,ESQ
56 LIVINGSTON AVE
ROSELAND NJ 07068

Part 2 line 3.1662

CONNELL FOLEY LLP
ROBERT K SCHEINBAUM,ESQ
56 LIVINGSTON AVE
ROSELAND NJ 07068

Part 2 line 3.1663

DAIMLER TRUST
C/O BK SERVICING LLC
P O BOX 131265
ROSEVILLE MN 55113-0011

Part 2 line 3.618

DINSMORE & SHOHL LLP
GRACE WINKLER CRANLEY,ESQ
227 WEST MONROE ST.,STE 3850
CHICAGO IL 60606

Part 2 line 3.2030

DREIFUSS BONACCI & PARKER PC
JOANNE M BONACCI
26 COLUMBIA TURNPIKE STE 101 NORTH
ENTRANCE
FLORHAM PARK NJ 07932

Part 2 line 3.2030

DREIFUSS BONACCI & PARKER PC
PAUL M MCCORMICK,ESQ
26 COLUMBIA TURNPIKE STE 101, NORTH
ENTRANCE
FLORHAM PARK NJ 07932

Part 2 line 3.2030

FROST BROWN TODD LLC
MARK A PLATT
100 CRESCENT COURT STE 350
DALLAS TX 75201

Part 2 line 3.1746

GEBHARDT & SMITH LLP
JAMES M SMITH
ONE SOUTH STREET
SUITE 2200
BALTIMORE MD 21202-3281

Part 2 line 3.2342

GEBHARDT & SMITH LLP
DAVID V FONTANA,ESQ
ONE SOUTH ST STE 2200
BALTIMORE MD 21202

Part 2 line 3.2342

GEBHARDT & SMITH LLP
LISA BITTLE TANCREDI
ONE SOUTH STREET
SUITE 2200
BALTIMORE MD 21202-3281

Part 2 line 3.2342

GREAT DANE LLC
JOE MARINO
1155 FOURT STAR DR
LANCASTER PA 17552

Part 2 line 3.1037

GUNNING & LA FAZIA INC.
KEVIN HOLLEY
33 COLLEGE HILL ROAD
SUITE 25B
WARWICK RI 02886

Part 2 line 3.38

HINMAN HOWARD & KATTELL LLP
KEVIN J BLOOM,ESQ
PARK 80 WEST -PLAZA II
250 PEHLE AVE STE 200
SADDLE BROOK NJ 07663-5834

Part 2 line 3.1574

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

IAM NATIONAL PENSION FUND
P O BOX 791129
BALTIMORE MD 21279-1129

Part 2 line 3.1150

IAMAW
WILLIAM W WINPISINGER-EDU CNT
24494 PLACID HARBOR WAY
HOLLYWOOD MD 20636

Part 2 line 3.1150

JALIL WALTERS
4109 CYPRESS ROAD
APT. M.
HARRISBURG PA 17112

Part 2 line 3.1225

MCCARTER & ENGLISH LLP
PETER M KNOB,ESQ
FOUR GATEWAY CENTER
100 MULBERRY ST
NEWARK NJ 07102

Part 2 line 3.381

MCCARTER & ENGLISH LLP
JOSEPH LUBERTAZZI JR.,ESQ
FOUR GATEWAY CENTER
100 MULBERRY ST
NEWARK NJ 07102

Part 2 line 3.381

MCCARTER & ENGLISH LLP
PETER M KNOB,ESQ
FOUR GATEWAY CENTER
100 MULBERRY ST
NEWARK NJ 07102

Part 2 line 3.382

MCCARTER & ENGLISH LLP
JOSEPH LUBERTAZZI JR.,ESQ
FOUR GATEWAY CENTER
100 MULBERRY ST
NEWARK NJ 07102

Part 2 line 3.382

MCMANIMON, SCOTLAND AND BAUMANN, LLC
ANTHONY SODONO, III; SARI PLACONA
75 LIVINGSTON AVE
ROSELAND NJ 07068

Part 2 line 3.618

NORRIS MCLAUGHLIN PA
MORRIS S BAUER,ESQ
400 CROSSING BOULEVARD,8TH FLOOR
BRIDGEWATER NJ 08807

Part 2 line 3.735

NORRIS MCLAUGHLIN PA
CATHERINE L COREY,ESQ
400 CROSSING BOULEVARD, 8TH FLOOR
BRIDGEWATER NJ 08807

Part 2 line 3.735

RIKER DANZIG SCHERER HYLAND & PERRETTI
LLP
JOSEPH L SCHWARTZ;MICHAEL TRENTIN
HEADQUARTERS PLAZA
ONE SPEEDWELL AVE
MORRISTOWN NJ 07962-1981

Part 2 line 3.1447

ROSEN SCHAFER & DIMEO
123 SOUTH BROAD STREET
SUITE 2170
PHILADELPHIA PA 19109

Part 2 line 3.2624

SAUL EWING ARNSTEIN AND LEHR LLP
JEREMIAH J VANDERMARK ESQ
1500 MARKET ST
38TH FLOOR
PHILADELPHIA PA 19102-2186

Part 2 line 3.91

Debtor **New England Motor Freight, Inc.**

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SHIPMAN & GOODWIN LLP
ERIC S GOLDSTEIN,ESQ
ONE CONSTITUTIONAL PLAZA
HARTFORD CT 06103

Part 2 line 3.2487

SHIPMAN & GOODWIN LLP
ERIC S GOLDSTEIN,ESQ
ONE CONSTITUTIONAL PLAZA
HARTFORD CT 06103

Part 2 line 3.2488

SIMON & MCCLOSKEY, LTD.
120 W. MADISON ST
SUITE 100
CHICAGO IL 60602

Part 2 line 3.422

SQUIRE PATTON BOGGS
NORMAN N KINEL
30 ROCKEFELLER PLAZA
NEW YORK NY 10112

Part 2 line 3.737

SQUIRE PATTON BOGGS (US) LLP
NORMAN N KINEL,ESQ
30 ROCKEFELLER PLAZA, 23RD FLOOR
NEW YORK NY 10112

Part 2 line 3.737

SQUIRE PATTON BOGGS (US) LLP
NORMAN N KINEL,ESQ
30 ROCKEFELLER PLAZA, 23RD FLOOR
NEW YORK NY 10112

Part 2 line 3.736

TROUTMAN SANDERS
DAVID A PISCIOTTA
875 THIRD AVENUE
NEW YORK NY 10022

Part 2 line 3.2126

TROUTMAN SANDERS
LOUIS CURCIO
875 THIRD AVENUE
NEW YORK NY 10022

Part 2 line 3.2126

TROUTMAN SANDERS
ALISSA PICCIONE
875 THIRD AVENUE
NEW YORK NY 10022

Part 2 line 3.2126

TURNER LAW FIRM LLC
ANDREW R TURNER,ESQ
76 SOUTH ORANGE AVE STE 106
SOUTH ORANGE NJ 07079

Part 2 line 3.1927

WAPNER NEWMAN WIGRIZER ET AL.
ADAM S. GETSON, ESQ.
2000 MARKET STREET
SUITE 2750
PHILADELPHIA PA 19103-4433

Part 2 line 3.2361

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

			Total of claim amounts
5a. Total claims from Part 1	5a.		\$272,877.11
5b. Total claims from Part 2	5b.	+	\$56,576,943.76
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		\$56,849,820.87

Fill in this information to identify the case:

Debtor name: New England Motor Freight, Inc.

United States Bankruptcy Court for the: District of New Jersey

Case number (if known): 19-12809

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. Title of contract LEASE AGREEMENT

State what the contract or lease is for PITTSBURGH TERMINAL # 65 REAL PROPERTY LEASE - 12731 ROUTE 30 WEST, IRWIN, PA 15642

Nature of debtor's interest LESSEE

State the term remaining 12/31/2019

List the contract number of any government contract _____

12731 RT 30 CORP
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201

2.2. Title of contract LETTER OF EXTENSION

State what the contract or lease is for REAL PROPERTY LEASE - 15 MIDDLETOWN AVE, NORTH HAVEN, CT

Nature of debtor's interest LESSEE

State the term remaining EXPIRATION 1/31/2017

List the contract number of any government contract _____

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

15 MIDDLETOWN AVENUE
CORPORATION
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201

2.3. Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 08/31/16

List the contract number of any government contract _____

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

1620 WINERY
170 WATER ST
SUITE 25
PLYMOUTH MA 02360-3863

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.4. **Title of contract** LEASE AGREEMENT AND FIRST AMENDMENT TO LEASE AGREEMENT
- State what the contract or lease is for** HAGERSTOWN TERMINAL # 47 REAL PROPERTY LEASE - 16503 HUNTERS GREEN PARKWAY, HAGERSTOWN, MD 21740
- Nature of debtor's interest** LESSEE
- State the term remaining** 11/30/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
16503 HUNTERS GREEN LLC
BRAD FULTON
16503 HUNTERS GREEN PARKWAY
HAGERSTOWN MD 21740
- 2.5. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 05/31/18
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
21ST CENTURY WINE
ESSEX ENTITIES
P O BOX 51998
BOSTON MA 02205-1998
- 2.6. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 11/10/16
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
21ST CENTURY WINE
P O BOX 51998
BOSTON MA 02205-1998
- 2.7. **Title of contract** LEASE AGREEENT
- State what the contract or lease is for** REAL PROPERTY LEASE - 345 WALCOTT ST., PAWTUCKET, RI 02860
- Nature of debtor's interest** LESSEE
- State the term remaining** 6/30/2011
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
345 WALCOTT STREET LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.8. **Title of contract** LEASE AGREEMENT
- State what the contract or lease is for** BALTIMORE /WASHINGTON TERMINAL # 40 REAL PROPERTY LEASE - 1508 JOHN AVENUE, BALTIMORE, MD 21227
- Nature of debtor's interest** LESSEE
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
3600 GEORGETOWN CORP
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.9. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER 4C FOOS CORP
4C FOODS CORP
TOTALOGISTIX
P O BOX 9506
AMHERST NY 14226-9506
- State the term remaining** DATED: 02/17/17
- List the contract number of any government contract** _____
- 2.10. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER 4FRONT LOGISTICS
4FRONT LOGISTICS INC
318 W ADAMS ST
OFFICE 1514
CHICAGO IL 60606-5111
- State the term remaining** DATED: 04/14/16
- List the contract number of any government contract** _____
- 2.11. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROVIDENCE TERMINAL # 02 REAL PROPERTY LEASE - 1.19 ACRES
- Nature of debtor's interest** LESSEE 55 DELTA DRIVE LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.12. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROVIDENCE TERMINAL # 02 REAL PROPERTY LEASE - 1.50 ACRES
- Nature of debtor's interest** LESSEE 55 DELTA DRIVE LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.13. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROVIDENCE TERMINAL # 02 REAL PROPERTY LEASE - 4.97 ACRES
- Nature of debtor's interest** LESSEE 55 DELTA DRIVE LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.14. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE OF REAL PROPERTY AT 68 - 67 SCHUYLER ROAD, DEWIT, NY 13457
- Nature of debtor's interest** LESSEE 68-67 SCHUYLER ROAD LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.15. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER 802 DISTRIBUTORS
P O BOX 5597
BURLINGTON VT 05402-5597
- State the term remaining** DATED: 05/10/16
- List the contract number of any government contract** _____
- 2.16. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A A A POLYMER
METRO LOGISTICS
P O BOX 730
SPEONK NY 11972-0730
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.17. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A A F E S
MASTSON INTEGRATED
P O BOX 6450
VILLA PARK IL 60181-6450
- State the term remaining** DATED: 08/02/18
- List the contract number of any government contract** _____
- 2.18. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A A F E S
MATSON INTEGRATED L
P O BOX 6450
VILLA PARK IL 60181-6450
- State the term remaining** DATED: 08/02/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.19. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A A F E S
MATSON INTEGRATED L
P O BOX 6450
VILLA PARK IL 60181-6450
- State the term remaining** DATED: 08/02/18
- List the contract number of any government contract** _____
- 2.20. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A B CONTAINER
CHAMPION CONTAINER
P O BOX 32130
NEW YORK NY 10087-2130
- State the term remaining** DATED: 02/09/16
- List the contract number of any government contract** _____
- 2.21. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A C MOORE
SBAR'S
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 03/16/18
- List the contract number of any government contract** _____
- 2.22. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A C MOORE
A C MOORE INC
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 11/27/15
- List the contract number of any government contract** _____
- 2.23. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A D M
P O BOX 487
BUFFALO NY 14203-0487
- State the term remaining** DATED: 12/09/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.24. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A D S TACTICAL
IL2000
P O BOX 2545
VIRGINIA BEACH VA 23450-2545
- State the term remaining** DATED: 09/26/17
- List the contract number of any government contract** _____
- 2.25. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A E S LOGISTICS
2505 SOUTH 320TH ST
#625
FEDERAL WAY WA 98003-5429
- State the term remaining** DATED: 03/23/16
- List the contract number of any government contract** _____
- 2.26. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A F C CABLE MA LOCATION
A F C CABLE SYSTEMS
I P S WORLDWIDE
P O BOX 982262
EL PASO TX 79998-2262
- State the term remaining** DATED: 10/06/16
- List the contract number of any government contract** _____
- 2.27. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A I S
4 BONNAZOLI AVE
HUDSON MA 01749-2849
- State the term remaining** DATED: 08/29/16
- List the contract number of any government contract** _____
- 2.28. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A I T WORLDWIDE LOGISTICS
A I T WORLDWIDE LOGI
P O BOX 66730
CHICAGO IL 60666-0730
- State the term remaining** DATED: 04/13/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.29. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A J BROTHERS
A & J BROTHERS LLC
2844 WILLIAMSBURG ST
STOW OH 44224-2869
- State the term remaining** DATED: 01/03/19
- List the contract number of any government contract** _____
- 2.30. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A J BROTHERS
A & J BROTHERS LLC
2844 WILLIAMSBURG ST
STOW OH 44224-2869
- State the term remaining** DATED: 01/03/19
- List the contract number of any government contract** _____
- 2.31. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A J LOGISTICS
2744 HYLAN BLVD
PMB #524
STATEN ISLAND NY 10306-4658
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.32. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A J MADISON
3605 13TH AVENUE
BROOKLYN NY 11218-3707
- State the term remaining** DATED: 08/19/16
- List the contract number of any government contract** _____
- 2.33. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A K IMPORTS LLC
A 3 K IMPORTS LLC
ATTN: ANITA IVATURI
51 MILLBURN DR
HILLSBOROUGH NJ 08844-2264
- State the term remaining** DATED: 01/09/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.34. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A N DERINGER TP
A N DERINGER
178 W SERVICE ROAD
CHAMPLAIN NY 12919-4440
- State the term remaining** DATED: 08/30/18
- List the contract number of any government contract** _____
- 2.35. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A P I
A P I INC
8320 E HARTFORD DR
SUITE 101
SCOTTSDALE AZ 85255-5590
- State the term remaining** DATED: 09/27/16
- List the contract number of any government contract** _____
- 2.36. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A R G SERVICES
TOLEDO PORT AUTHORIT
11013 AIRPORT HWY
SWANTON OH 43558
- State the term remaining** DATED: 09/08/16
- List the contract number of any government contract** _____
- 2.37. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A R M TRANS
A R M TRANSPORTATION
1 VICTORIA MOUNT
JOHNSTON RI 02919-6229
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.38. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER A S T
PO BOX 540
EBENSBURG PA 15931-0540
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|-------|---|--|---|
| 2.39. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/17/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

A T I PERFORMANCE
6747 WHITESTONE RD
BALTIMORE MD 21207-4103 |
| 2.40. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

A T S LOGISTICS
A T S LOGISTICS SVCS
725 OPPORTUNITY DR
SAINT CLOUD MN 56301-5886 |
| 2.41. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/04/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

A T S LOGISTICS BLANKET
A T S LOGISTICS
ADVANCE TRANSP SYS
10558 TACONIC TERRAC
CINCINNATI OH 45215-1125 |
| 2.42. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

A T T S
P O BOX 1058
LAKE ZURICH IL 60047-1058 |
| 2.43. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

A W S ADVANCED WHEEL
400 W WILSON BRIDGE
WORTHINGTON OH 43085-5215 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|-------|---|--|---|
| 2.44. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTER OFFICE - COMMUNICATIONS
INTER OFFICE COMMUNICATION - MEMO - RE: AAA COOPER MEETING
CARRIER
EFFECTIVE DATE: 10/21/1998
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
RICK BOWDEN
PO BOX 6827
DOTHAN AL 36302 |
| 2.45. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SHIPMENT LIST
SHIPMENT LIST
CARRIER
EFFECTIVE DATE: 10/27/2003
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
PO BOX 6827
DOTHAN AL 36302 |
| 2.46. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTER OFFICE - COMMUNICATIONS
INTER OFFICE - COMMUNICATIONS MEMO
CARRIER
EFFECTIVE DATE: 10/28/1998
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
RICK BOWDEN
PO BOX 6827
DOTHAN AL 36302 |
| 2.47. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTER OFFICE - COMMUNICATIONS
INTER OFFICE COMMUNICATION - MEMO - RE: AAA COOPER TRANSPORTATION
CARRIER
EFFECTIVE DATE: 10/28/1998
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
RICK BOWDEN
PO BOX 6827
DOTHAN AL 36302 |
| 2.48. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SUPPLEMENT 56 TO TARRIFF ACT 101-L
APPLICATION
CARRIER
EFFECTIVE DATE: 11/17/2004
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
PO BOX 6827
DOTHAN AL 36302 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|-------|---|--|--|
| 2.49. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
FREIGHT/SHIPMENT AGREEMENT
CARRIER
EFFECTIVE DATE: 12/01/2003
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
FRED PEARCE - SENIOR VP
1751 KINSEY ROAD
DOTHAN AL 36302 |
| 2.50. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
FREIGHT/SHIPMENT AGREEMENT
CARRIER
EFFECTIVE DATE: 12/01/2003
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
FRED PEARCE - SENIOR VP
1751 KINSEY ROAD
DOTHAN AL 36302 |
| 2.51. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
INTERCHANGE AGREEMENT
CARRIER
EFFECTIVE DATE: 5/24/1999
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
FRED PEARCE - SENIOR VP
1751 KINSEY ROAD
DOTHAN AL 36302 |
| 2.52. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
INTERCHANGE AGREEMENT
CARRIER
EFFECTIVE DATE: 5/24/1999
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
FRED PEARCE - SENIOR VP
1751 KINSEY ROAD
DOTHAN AL 36302 |
| 2.53. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
INTERCHANGE AGREEMENT
CARRIER
EFFECTIVE DATE: 5/24/1999
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
FRED PEARCE - SENIOR VP
1751 KINSEY ROAD
DOTHAN AL 36302 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|-------|---|---|---|
| 2.54. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SUPPLEMENT 75 TO TARRIFF ACT 101-L
APPLICATION
CARRIER
EFFECTIVE DATE: 5/25/2005
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
PO BOX 6827
DOTHAN AL 36302 |
| 2.55. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
FREIGHT/SHIPMENT
CARRIER
EFFECTIVE DATE: 5/4/1998
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
FRED PEARCE - SENIOR VP
1751 KINSEY ROAD
DOTHAN AL 36302 |
| 2.56. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | TARRIFF ACT 11-L
APPLICATION
CARRIER
EFFECTIVE DATE: 6/31/2003
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
PO BOX 6827
DOTHAN AL 36302 |
| 2.57. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LTL RATE ADJUSTMENT RESPONSE LETTER
CORRESPONDENCE
CARRIER
EFFECTIVE DATE: 7/5/2004
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
RAYMOND MEREDETH
ASST. PRICING MGR.
1751 KINSEY ROAD
DOTHAN AL 36302 |
| 2.58. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
FREIGHT/SHIPMENT
CARRIER
EFFECTIVE DATE: 7/6/1995
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AAA COOPER TRANSPORTATION
FRED PEARCE - SENIOR VP
1751 KINSEY ROAD
DOTHAN AL 36302 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.59. **Title of contract** CONFIDENTIALITY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONFIDENTIALITY AGREEMENT
- Nature of debtor's interest** CARRIER AAA COOPER TRANSPORTATION
CHARLIE PIKETTE - VP
1751 KINSEY ROAD
DOTHAN AL 36302
- State the term remaining** EFFECTIVE DATE: 8/13/2009
- List the contract number of any government contract** _____
- 2.60. **Title of contract** INVOICE - REFUND **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INVOICE - REFUND
- Nature of debtor's interest** CARRIER AAA COOPER TRANSPORTATION
JAYNE DROWN
TRAFFIC DEPT.
PO BOX 6827
DOTHAN AL 36302
- State the term remaining** EFFECTIVE DATE: 9/23/2005
- List the contract number of any government contract** _____
- 2.61. **Title of contract** INTERLINE EXCEPTION RESPONSIBILITY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CORRESPONDENCE
- Nature of debtor's interest** CARRIER AAA COOPER TRANSPORTATION
TED ROBERTS
TERMINAL MGR.
108 CONNECTICUT DR.
BURLINGTON NJ 08016-4104
- State the term remaining** EFFECTIVE DATE: 9/4/2003
- List the contract number of any government contract** _____
- 2.62. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AADCO MEDICAL
AADCO MEDICAL INC
P O BOX 410
RANDOLPH VT 05060-0410
- State the term remaining** DATED: 02/02/18
- List the contract number of any government contract** _____
- 2.63. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AADCO MEDICAL
P O BOX 410
RANDOLPH VT 05060-0410
- State the term remaining** DATED: 02/02/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

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- 2.64. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ABBOTT RUBBER CO
1700 NICHOLAS BLVD
ELK GROVE VILLAGE IL 60007-5902
- State the term remaining** DATED: 11/04/15
- List the contract number of any government contract** _____
- 2.65. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ABSOLUTE COATINGS
POR-15
TRANZACT TECHNOLOGI
360 W BUTTERFIELD RD
ELMHURST IL 60126-5041
- State the term remaining** DATED: 05/06/16
- List the contract number of any government contract** _____
- 2.66. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ACCELA
ACELA
P O BOX 2037
HAGERSTOWN MD 21742-2037
- State the term remaining** DATED: 04/27/16
- List the contract number of any government contract** _____
- 2.67. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ACTION LOGISTICS
624 ANDERSON DRIVE
ROMEIOVILLE IL 60446-1372
- State the term remaining** DATED: 08/10/16
- List the contract number of any government contract** _____
- 2.68. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ACTIVE RADIATOR SUPPLY
ACTIVE RADIATOR SPLY
3675 AMBER ST
PHILADELPHIA PA 19134-2730
- State the term remaining** DATED: 03/30/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.69. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ACUTECH PRECISION
ACUTEC PRECISION AER
LOGISTICS PLUS
P O BOX 183850
SHELBY TOWNSHIP MI 48318-3850
- State the term remaining** DATED: 01/11/17
- List the contract number of any government contract** _____
- 2.70. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AD SHIPPERS
ADVERTISING SHIPPERS
70 CAMPUS DRIVE
EDISON NJ 08837-3911
- State the term remaining** DATED: 04/28/16
- List the contract number of any government contract** _____
- 2.71. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AD SHIPPERS
ADVERTISING SHIPPERS
70 CAMPUS DR
EDISON NJ 08837-3911
- State the term remaining** DATED: 04/28/16
- List the contract number of any government contract** _____
- 2.72. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AD SHIPPERS
ADSHIPPERS
70 CAMPUS DRIVE
EDISON NJ 08837-3911
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.73. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AD SHIPPERS
70 CAMPUS DRIVE
EDISON NJ 08837-3911
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.74. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ADDED TRANS**
- State the term remaining** DATED: 03/08/17 **ADDED TRANSPORTATION**
- List the contract number of any government contract** _____ **904 S ROSELLE RD**
SCHAUMBURG IL 60193-3963
- 2.75. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ADVANCE COATINGS**
- State the term remaining** DATED: 04/05/16 **ADVANCED COATINGS**
- List the contract number of any government contract** _____ **P O BOX 457**
WESTMINSTER MA 01473-0457
- 2.76. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ADVANCED BUILDING PRO**
- State the term remaining** DATED: 06/08/16 **ADVANCED BUILDING PR**
- List the contract number of any government contract** _____ **P O BOX 98**
SPRINGVALE ME 04083-0098
- 2.77. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ADVANCED FOOD PRODS**
- State the term remaining** DATED: 09/27/17 **ONE CITY PLACE DR #4**
- List the contract number of any government contract** _____ **SAINT LOUIS MO 63141-7066**
- 2.78. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ADVANCED POLYMER TEC**
- State the term remaining** DATED: 12/16/16 **P O BOX 160**
- List the contract number of any government contract** _____ **HARMONY PA 16037-0160**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|-------|---|--|--|
| 2.79. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ADVANTAGE FREIGHT
A F N LLC
7230 N CALDWELL AVE
NILES IL 60714-4502 |
| 2.80. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/27/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AERC RECYCLING
AERC RECYCLING SOLUT
P O BOX 148
NEFFS PA 18065-0148 |
| 2.81. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/21/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AFFINITY BEVERAGE
AFFINITY BEVERAGES L
63 FOREST AVE
LOCUST VALLEY NY 11560-1734 |
| 2.82. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/21/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AFFINITY BEVERAGE
AFFINITY BEVERAGES L
63 FOREST AVE
LOCUST VALLEY NY 11560-1734 |
| 2.83. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/06/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AFFINITY BEVERAGE
AFFINITY BEVERAGES L
63 FOREST AVE
LOCUST VALLEY NY 11560-1734 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.84. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AFS AMER FAN
AMER FAN CO
A F S LOGISTICS INC
PO BOX 18170
SHREVEPORT LA 71138-1170
- State the term remaining** DATED: 03/23/16
- List the contract number of any government contract** _____
- 2.85. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AFS PFAUDLER
PFAUDLER INC
A F S
P O BOX 18170
SHREVEPORT LA 71138-1170
- State the term remaining** DATED: 03/06/18
- List the contract number of any government contract** _____
- 2.86. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AFS PFAUDLER
PFAUDLER INC
A F S LOGISTICS
P O BOX 18170
SHREVEPORT LA 71138-1170
- State the term remaining** DATED: 11/19/15
- List the contract number of any government contract** _____
- 2.87. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AFS TOTAL BIZ
TOTAL BIZ FULFILLMEN
A F S
P O BOX 18170
SHREVEPORT LA 71138-1170
- State the term remaining** DATED: 11/19/15
- List the contract number of any government contract** _____
- 2.88. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AFS TOTAL BIZ
TOTAL BIZ FULFILLMEN
A F S
P O BOX 18170
SHREVEPORT LA 71138-1170
- State the term remaining** DATED: 11/19/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.89. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AFS TOTAL BIZ
HOBBY HOUSE PRESS
A F S
P O BOX 18170
SHREVEPORT LA 71138-1170
- State the term remaining** DATED: 12/29/15
- List the contract number of any government contract** _____
- 2.90. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AFS TOTAL BIZ
HOBBY HOUSE PRESS
A F S
P O BOX 18170
SHREVEPORT LA 71138-1170
- State the term remaining** DATED: 12/29/15
- List the contract number of any government contract** _____
- 2.91. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AGILEX
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.92. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AIA GLOBBAL
A I A GLOBAL LOGISTI
1075 KINGWOOD DR
KINGWOOD TX 77339-3000
- State the term remaining** DATED: 01/11/17
- List the contract number of any government contract** _____
- 2.93. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AIKO IMPORTERS
5824 PEACHTREE CORNE
PEACHTREE CORNERS GA 30092-3405
- State the term remaining** DATED: 07/23/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|-------|---|--|--|
| 2.94. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/29/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AIREX CORP
AIREX FILTER
17 EXECUTIVE DR
HUDSON NH 03051-4903 |
| 2.95. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/08/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AIREX CORP
AIREX FILTER CORP
17 EXECUTIVE DR
HUDSON NH 03051-4903 |
| 2.96. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ALADDIN BAKERS
ALADDIN BAKERS INC
240 25TH STREET
BROOKLYN NY 11232-1338 |
| 2.97. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/30/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ALCOA
ARCONIC
P O BOX 428011
BROOKPARK OH 44142-8011 |
| 2.98. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/14/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ALEX PRODUCTS
AP ALTERNATIVES LLC
P O BOX 326
RIDGEVILLE CORNERS OH 43555-0326 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.99. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALIMED INC
- State the term remaining** DATED: 10/19/17 ALIMED
- List the contract number of any government contract** _____ P O BOX 9133
CHELSEA MA 02150-9133
- 2.100. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALIMED INC
- State the term remaining** DATED: 10/19/17 MEDTECHNA
- List the contract number of any government contract** _____ P O BOX 9133
CHELSEA MA 02150-9133
- 2.101. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALIMED INC
- State the term remaining** DATED: 10/19/17 P O BOX 9133
- List the contract number of any government contract** _____ CHELSEA MA 02150-9133
- 2.102. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALKOLOL
- State the term remaining** DATED: 03/17/17 P O BOX 51910
- List the contract number of any government contract** _____ LIVONIA MI 48151-5910
- 2.103. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALL AMER CONTAINER
- State the term remaining** DATED: 06/25/15 4507 EAGLE FALLS PL
- List the contract number of any government contract** _____ TAMPA FL 33619-9612

Debtor **New England Motor Freight, Inc.**

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- 2.104. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALL AMERICAN HOSE
6420 W RIDGE RD
ERIE PA 16506-1023
- State the term remaining** DATED: 05/05/16
- List the contract number of any government contract** _____
- 2.105. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALL AMERICAN HOSE
6420 W RIDGE RD
ERIE PA 16506-1023
- State the term remaining** DATED: 05/25/18
- List the contract number of any government contract** _____
- 2.106. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLEGHENY PETROLEUM
999 AIRBRAKE AVE
WILMERDING PA 15148-1064
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.107. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLEGHENY PETROLEUM
999 AIRBRAKE AVE
WILMERDING PA 15148-1064
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.108. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLEN DIST
ALLEN DISTRIBUTION
1532 COMMERCE AVE
CARLISLE PA 17015-9161
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.109. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLEN FLAVORS
ALLEN FLAVORS INC
23 PROGRESS ST
EDISON NJ 08820-1102
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.110. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLIANCE SHIPPERS
ALLIANCE SHIPPERS IN
19 CROWS MILL RD
KEASBEY NJ 08832-1004
- State the term remaining** DATED: 08/04/17
- List the contract number of any government contract** _____
- 2.111. **Title of contract** MOTOR TRUCK CARGO **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. MXI93077459
- Nature of debtor's interest** INSURED ALLIANZ
AGCS MARINE INSURANCE
COMPANY
225 WASHINGTON ST., SUITE 1800,
CHICAGO IL 60606
- State the term remaining** 6/16/2019
- List the contract number of any government contract** _____
- 2.112. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLIED CONVERTERS
P O BOX 548
NEW ROCHELLE NY 10802-0548
- State the term remaining** DATED: 03/21/17
- List the contract number of any government contract** _____
- 2.113. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLIED FROZEN STORAGE
ALLIED FROZEN STORAG
250 STATE ST
BROCKPORT NY 14420
- State the term remaining** DATED: 10/01/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.114. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLMOBILE TECH
ALL MOBILE TECHNOLOG
P O BOX 808
GREAT BARRINGTON MA 01230-0808
- State the term remaining** DATED: 08/07/17
- List the contract number of any government contract** _____
- 2.115. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALLMOBILE TECH
ALLMOBILE TECHNOLOGI
P O BOX 808
GREAT BARRINGTON MA 01230-0808
- State the term remaining** DATED: 08/07/17
- List the contract number of any government contract** _____
- 2.116. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALPHA CHEM SVC
ALPHA CHEMICAL SVC
P O BOX 431
STOUGHTON MA 02072-0431
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.117. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALPHA TECH PET
25 PORTER ST
LITTLETON MA 01460-1434
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.118. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ALPHABRODER
6 NESHAMINY INTERPLE
TREVOSSE PA 19053-6964
- State the term remaining** DATED: 01/24/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.119. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/24/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ALPHABRODER
6 NESHAMINY INTERPLE
TREVOSE PA 19053-6964 |
| 2.120. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/04/19
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ALPHATRONX LTD
ALPHATRON-X LTD
16490 STAGECOACH DR
GARRETTSVILLE OH 44231-9568 |
| 2.121. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/09/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

AMER HONDA
AMER HONDA POWER EQU
FREIGHTQUOTE
901 W CARONDELET DR
KANSAS CITY MO 64114-4674 |
| 2.122. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/09/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

AMER HONDA
AMER HONDA POWER EQU
FREIGHTQUOTE
901 W CARONDELET DR
KANSAS CITY MO 64114-4674 |
| 2.123. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

AMER LITHO
175 MERCEDES DR
CAROL STREAM IL 60188-9409 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.124. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **AMER PACKAGING**
- State the term remaining** DATED: 11/08/17 **103 WEST BROAD ST**
- List the contract number of any government contract** _____ **STORY CITY IA 50248-1016**
- 2.125. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **AMER VETERAN CONTRACTING**
- State the term remaining** DATED: 11/30/18 **AMER VETERAN CONTRAC**
- List the contract number of any government contract** _____ **18521 E QUEEN CREEK**
- QUEEN CREEK AZ 85242**
- 2.126. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **AMER WIRE TIE CO**
- State the term remaining** DATED: 06/25/15 **P O BOX 696**
- List the contract number of any government contract** _____ **NORTH COLLINS NY 14111-0696**
- 2.127. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **AMER YEAST SALES**
- State the term remaining** DATED: 03/17/17 **1620 PREFONTAINE**
- List the contract number of any government contract** _____ **MONTREAL QC H1W2N8**
- 2.128. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HARRISBURG TERMINAL # 70 REAL PROPERTY LEASE - 2800 APPLETON STREET, CAMP HILL, PA 17011-8001
- Nature of debtor's interest** LESSEE **AMERACH LP**
- State the term remaining** 12/31/2026 **C/O AMZ MANAGEMENT LLC**
- List the contract number of any government contract** _____ **1-71 NORTH AVENUE EAST**
- ELIZABETH NJ 07201**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.129. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FLOOD INSURANCE
POLICY NO. AB00131015
INSURED
7/15/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AMERICAN BANKERS INS CO OF FL
11222 QUAIL ROOST DR
MIAMI FL 33157 |
| 2.130. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FLOOD INSURANCE
POLICY NO. N/A
INSURED
9/20/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AMERICAN BANKERS INS CO OF FL
11222 QUAIL ROOST DR
MIAMI FL 33157 |
| 2.131. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/12/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AMERICAN FREIGHT - BLANKE
AMER GROUP
25 S ARIZONA PL
CHANDLER AZ 85225-8523 |
| 2.132. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/03/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AMERICO CHEMICAL
AMERICO CHEMICAL PRO
P O BOX 88813
CAROL STREAM IL 60188-0813 |
| 2.133. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
AMERI-CONNECT
LAUB INTERNATIONAL
90 WALKER DRIVE
BRAMPTON ON L6T4H6
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.134. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AMERI-CONNECT
2 KENVIEW BLVD
BRAMPTON ON L6T5E4
CANADA
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.135. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AMWARE
AMRATE
19801 HOLLAND RD #A
BROOK PARK OH 44142-1339
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.136. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AMWARE WAREHOUSE
19801 HOLLAND RD
BROOK PARK OH 44142-1339
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.137. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ANGELS DIST
ANGELS DISTRIBUTION
P O BOX 609
INDIANOLA PA 15051-0609
- State the term remaining** DATED: 10/08/15
- List the contract number of any government contract** _____
- 2.138. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ANN & HOPE
PO BOX 96
CUMBERLAND RI 02864-0096
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.139. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ARAMSCO
1480 GRANDVIEW AVE
PAULSBORO NJ 08066-1801
- State the term remaining** DATED: 10/07/16
- List the contract number of any government contract** _____
- 2.140. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ARCHGATE
ARCHGATE %EFREIGHT S
2615 GEORGE BUSBEE P
KENNESAW GA 30144-4981
- State the term remaining** DATED: 03/24/16
- List the contract number of any government contract** _____
- 2.141. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ARDENE CO FEDEX TN
OMNITRANS
4300 JEAN TALON W
MONTREAL QC H4P1W5
- State the term remaining** DATED: 08/09/18
- List the contract number of any government contract** _____
- 2.142. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ARDT SALES LLC
165 LOCUST AVE
STATEN ISLAND NY 10306-3105
- State the term remaining** DATED: 08/27/18
- List the contract number of any government contract** _____
- 2.143. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ARETT SALES CORP
9285 COMMERCE HWY
PENNSAUKEN NJ 08110-1201
- State the term remaining** DATED: 05/05/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.144. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ARETT SALES CORP
9285 COMMERCE HWY
PENNSAUKEN NJ 08110-1201 |
| 2.145. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/08/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ARIEL CORP
35 BLACKJACK RD
MOUNT VERNON OH 43050-9482 |
| 2.146. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/08/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ARLIN MFG
ARLIN MANUFACTURING
P O BOX 222
LOWELL MA 01853-0222 |
| 2.147. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ARMALY BRANDS
PO BOX 611
WALLED LAKE MI 48390-0611 |
| 2.148. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ARMSTRONG PUMPS
ARMSTRONG PUMPS INC
2233 ARGENTIA RD #20
MISSISSAUGA ON L5N2X7
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.149. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/07/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ARMSTRONGKOVER KWIK
ARMSTRONG/KOVER KWIK
P O BOX 337
MCKEES ROCKS PA 15136-0337 |
| 2.150. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/04/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ASACLEAN
BENCHMARK TRADE SOLU
3615 LAIRD RD UNIT 2
MISSISSAUGA ON L5L5Z8
CANADA |
| 2.151. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ASSOCIATED BAG CO
400 W BODEN STREET
MILWAUKEE WI 53207-6276 |
| 2.152. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ASSOCIATED BUYERS
P O BOX 399
BARRINGTON NH 03825-0399 |
| 2.153. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
LEASE OF REAL PROPERTY AT 11700 NW 36TH AVENUE,
HIALEAH, FL 33167
LESSOR
2/28/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ATI CONTAINER SERVICES LLC
ATTN: CARLOS HERMO
11700 NW 36TH AVENUE
HIALEAH FL 33167 |

Debtor **New England Motor Freight, Inc.**

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- | | | | |
|--------|---|--|---|
| 2.154. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/11/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ATLANTIC DETROIT DIESEL
STEWART & STEVENSON
P O BOX 950
LODI NJ 07644-0950 |
| 2.155. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/11/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ATLANTIC DETROIT DIESEL
STEWART & STEVENSON
P O BOX 950
LODI NJ 07644-0950 |
| 2.156. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/11/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ATLANTIC DETROIT DIESEL
STEWART & STEVENSON
P O BOX 950
LODI NJ 07644-0950 |
| 2.157. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/11/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ATLANTIC DETROIT DIESEL
STEWART & STEVENSON
P O BOX 950
LODI NJ 07644-0950 |
| 2.158. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/10/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ATLANTIC IMPORTING
ATLANTIC BEVERAGE
350 HOPPING BROOK RD
HOLLISTON MA 01746-1458 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.159. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/10/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ATLANTIC IMPORTING
ATLANTIC IMPORTING D
315 HOPPING BROOK RD
HOLLISTON MA 01746 |
| 2.160. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/25/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ATLANTIC LABORATORIES
NORTH AMERICAN KELP
41 CROSS ST
WALDOBORO ME 04572-5634 |
| 2.161. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/28/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ATLANTIC LABORATORIES
ATLANTIC LABORATORIE
41 CROSS ST
WALDOBORO ME 04572-5634 |
| 2.162. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/23/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ATOSA CATERING INC
1225 W IMPERIAL HWY
BREA CA 92821 |
| 2.163. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/11/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

AUBURN MFG
AUBURN MFG INC
P O BOX 220
MECHANIC FALLS ME 04256-0220 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.164. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AUBURN MFG
AUBURN MFG INC
P O BOX 220
MECHANIC FALLS ME 04256-0220
- State the term remaining** DATED: 08/11/17
- List the contract number of any government contract** _____
- 2.165. **Title of contract** LEASE - MOTOR VEHICLE - CLOSED END **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE OF 2016 AUDI A6, VIN 7328
- Nature of debtor's interest** LESSEE AUDI FREEHOLD
3561 ROUTE 9 NORTH
FREEHOLD NJ 07728
- State the term remaining** 6/3/2019
- List the contract number of any government contract** _____
- 2.166. **Title of contract** LEASE - MOTOR VEHICLE - CLOSED END **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE OF 2019 AUDI Q7, VIN 0709
- Nature of debtor's interest** LESSEE AUDI FREEHOLD
3561 ROUTE 9 NORTH
FREEHOLD NJ 07728
- State the term remaining** 2/27/2021
- List the contract number of any government contract** _____
- 2.167. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AUDIT SOURCE
AUDIT SOURCE INC
P O BOX 87
ABSECON NJ 08201-0087
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.168. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AUMA ACTUATORS
AUMA ACTUATORS INC
100 SOUTHPOINTE BLVD
CANONSBURG PA 15317-9559
- State the term remaining** DATED: 01/28/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.169. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AURAGLOW DIST
- State the term remaining** DATED: 04/16/18 AURAGLOW DISTRIBUTIO
- List the contract number of any government contract** 6 LANDMARK SQ
STAMFORD CT 06901-2704
- 2.170. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AUTOPARTS COMPONENTS
- State the term remaining** DATED: 02/08/17 4401 LITTLE RD
- List the contract number of any government contract** ARLINGTON TX 76016-5621
- 2.171. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AVANTI
- State the term remaining** DATED: 01/29/16 241 MAIN ST
- List the contract number of any government contract** BUFFALO NY 14203-2703
- 2.172. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER AVANTIX
- State the term remaining** DATED: 06/25/15 AVANTIX INC
- List the contract number of any government contract** P O BOX 267
PINE ISLAND NY 10969-0267
- 2.173. **Title of contract** AUTO - ONTARIO **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 6741090784
- Nature of debtor's interest** INSURED AVIVA INS CO OF CANADA
- State the term remaining** 8/31/2019 10 AVIVA WAY, SUITE 100
- List the contract number of any government contract** MARKHAM ON L6G 0G1
CANADA

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.174. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | AUTOMOBILE INSURANCE WITH POLICY NUMBER 6741090784

INSURANCE CONTRACT

INSURED

EFFECTIVE AUG 31, 2018

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

AVIVA INSURANCE COMPANY
10 AVIVA WAY STE 100
MARKHAM ON L6G 0G1
CANADA |
| 2.175. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 09/25/17

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

AVRON
277 BASALTIC RD
CONCORD ON L4K4W8
CANADA |
| 2.176. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 06/25/15

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

B & B BATTERY (USA)
6415 RANDOLPH ST
CITY OF COMMERCE CA 90040-3511 |
| 2.177. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 06/25/15

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

B M I
3437 BOUL GRANDE ALL
BOISBRIAND QC J7H1H5 |
| 2.178. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 02/24/17

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

B M M TRANS
B M M TRANSPORTATION
209 W JACKSON BLVD
CHICAGO IL 60606 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.179. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **B S G HANDCRAFT**
- State the term remaining** DATED: 03/10/16 **800 W FIRST AVE**
- List the contract number of any government contract** _____ **SHAKOPEE MN 55379-1148**
- 2.180. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **B UNITED INTL**
- State the term remaining** DATED: 06/25/15 **P O BOX 661**
- List the contract number of any government contract** _____ **REDDING CT 06896-0661**
- 2.181. **Title of contract** CERTIFICATE OF LIABILITY INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CERTIFICATE OF LIABILITY INSURANCE
- Nature of debtor's interest** INSURED **B&L BROKERAGE SERVICE, INC.**
- State the term remaining** 4/10/2019 **111 CONGRESSIONAL BLVD.**
- List the contract number of any government contract** _____ **CARMEL IN 46032**
- 2.182. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE OF REAL PROPERTY AT 159 EAST EADS ST, W BABYLON, NY
- Nature of debtor's interest** LESSEE **BABCO LLC**
- State the term remaining** 12/31/2019 **C/O MYRON P. SHEVELL**
- List the contract number of any government contract** _____ **1-71 NORTH AVENUE EAST**
- ELIZABETH NJ 07201**
- 2.183. **Title of contract** COMMERCIAL INSURANCE PREMIUM FINANCE AND SECURITY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **BANKDIRECT CAPITAL FINANCE**
- State the term remaining** 11 MONTHS - COMMENCING 04/30/2018 **TWO CONWAY PARK**
- List the contract number of any government contract** _____ **150 NORTH FIELD DRIVE, SUITE 190**
- LAKE FOREST IL 60045**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.184. **Title of contract** COMMERCIAL INSURANCE PREMIUM FINANCE AND SECURITY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER
- State the term remaining** 11 MONTHS - COMMENCING 05/10/2018
- List the contract number of any government contract** _____
- BANKDIRECT CAPITAL FINANCE
TWO CONWAY PARK
150 NORTH FIELD DRIVE, SUITE 190
LAKE FOREST IL 60045
- 2.185. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 12/01/16
- List the contract number of any government contract** _____
- BATES INDUSTRIAL
BATES INDUSTRIAL COA
P O BOX 792
LITTLETON MA 01460-2792
- 2.186. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 03/14/16
- List the contract number of any government contract** _____
- BATTENFIELD GREASE OIL CORP
BATTENFIELD GREASE &
PO BOX 728
N TONAWANDA NY 14120-0728
- 2.187. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 12/03/16
- List the contract number of any government contract** _____
- BAY BAY
BAY & BAY
2905 W SERVICE RD
EAGAN MN 55121
- 2.188. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 05/13/16
- List the contract number of any government contract** _____
- BAY SALES
113 FILLMORE ST
BRISTOL PA 19007-5409

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.189. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BAY STATE WINE & SPI
P O BOX 204
AVON MA 02322-0204 |
| 2.190. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/20/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BAY WATER TRANS
BAY WATER TRANSPORTA
960 PLEASANTVILLE DR
HOUSTON TX 77029-2432 |
| 2.191. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/17/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BEACON INC
1213 REMINGTON BLVD
ROMEOVILLE IL 60446-6504 |
| 2.192. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/17/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BECKER LOGISTICS
P O BOX 88126
CAROL STREAM IL 60188-0126 |
| 2.193. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BECKETT
P O BOX 2196
VIRGINIA BEACH VA 23450-2196 |

Debtor **New England Motor Freight, Inc.**

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- 2.194. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BED ROCK LOGISTICS**
- State the term remaining** DATED: 12/29/15 **1707 ORLANDO CENTRAL**
- List the contract number of any government contract** _____ **ORLANDO FL 32809-5759**
- 2.195. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BELCAM**
- State the term remaining** DATED: 06/25/15 **P O BOX 277**
- List the contract number of any government contract** _____ **ROUSES POINT NY 12979-0277**
- 2.196. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BELLCOM CORP**
- State the term remaining** DATED: 06/25/15 **3 MOUNTAIN AVE**
- List the contract number of any government contract** _____ **MONSEY NY 10952-2944**
- 2.197. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BELLCOM CORP**
- State the term remaining** DATED: 11/05/15 **OHIO TRADING INC**
- List the contract number of any government contract** _____ **110 CHESTNUT RIDGE R**
- MONTVALE NJ 07645-1706**
- 2.198. **Title of contract** FIRST LEASE AMENDMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDIANAPOLIS TERMINAL # 42 REAL PROPERTY LEASE - 1702 SOUTH BELMONT AVE, INDIANAPOLIS, IN 46221
- Nature of debtor's interest** LESSEE **BELMONT & MINNESOTA TERMINAL PARTNERSHIP**
- State the term remaining** 7/31/2018 **8463 CASTLEWOOD DRIVE**
- List the contract number of any government contract** _____ **INDIANAPOLIS IN 46250**

Debtor **New England Motor Freight, Inc.**

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- 2.199. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BELTEX CO
P O BOX 42321
PITTSBURGH PA 15203-0321
- State the term remaining** DATED: 03/21/17
- List the contract number of any government contract** _____
- 2.200. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BENLIN DIST
2769 BROADWAY
BUFFALO NY 14227-1004
- State the term remaining** DATED: 01/07/19
- List the contract number of any government contract** _____
- 2.201. **Title of contract** MOTOR VEHICLE LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE OF 2016 LINCOLN MKS, VIN 2882
- Nature of debtor's interest** LESSEE BERGEY'S LINCOLN MERCURY INC.
1201 N. BROAD STREET
LANSDALE PA 19446
- State the term remaining** 6/14/2019
- List the contract number of any government contract** _____
- 2.202. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BERGQUIST
BERGQUIST INC
P O BOX 351330
TOLEDO OH 43635-1330
- State the term remaining** DATED: 10/16/15
- List the contract number of any government contract** _____
- 2.203. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BERGQUIST
INSTANATURAL
P O BOX 351330
TOLEDO OH 43635-1330
- State the term remaining** DATED: 10/16/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

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- 2.204. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BERNSTEIN DISPLAY
ALT PLUS
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.205. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BERNSTEIN DISPLAY
LEO D. BERNSTEIN & S
TECH TRANSPORT
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.206. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BEST FIRE INC
BEST FIRE
1760 CENTRAL AVE
COLONIE NY 12205-4701
- State the term remaining** DATED: 01/10/17
- List the contract number of any government contract** _____
- 2.207. **Title of contract** SERVICE AGREEMENT DATED OCT 4, 2010 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SERVICE CONTRACT
- Nature of debtor's interest** CLIENT BESTPASS INC
828 WASHINGTON AVENUE
ALBANY NY 12203-1622
- State the term remaining** AT WILL BY EITHER PARTY
- List the contract number of any government contract** _____
- 2.208. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER BETT-A-WAY TRAFFIC
BETTAWAY WAREHOUSE
110 SYLVANIA PLACE
SOUTH PLAINFIELD NJ 07080-1448
- State the term remaining** DATED: 03/05/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

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- | | | | |
|--------|---|--|--|
| 2.209. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/13/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BG FUCHS NORTH AMERICA
FUCHS NORTH AMERICA
BLUEGRACE LOGISTICS
2846 S FALKENBURG RD
RIVERVIEW FL 33578-2563 |
| 2.210. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/28/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BICKELS SNACK FOODS
P O BOX 2427
YORK PA 17405-2427 |
| 2.211. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BICKELS SNACK FOODS
HANOVER FOODS
P O BOX 334
HANOVER PA 17331-0334 |
| 2.212. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/16/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BICKELS SNACK FOODS
HANOVER FOODS
P O BOX 334
HANOVER PA 17331-0334 |
| 2.213. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/22/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BICKELS SNACK FOODS
HANOVER FOODS
P O BOX 334
HANOVER PA 17331-0334 |

Debtor **New England Motor Freight, Inc.**

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- 2.214. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BIG MOUTH TOYS**
- State the term remaining** DATED: 06/25/15 **655 WINDING BROOK DR**
- List the contract number of any government contract** _____ **GLASTONBURY CT 06033-4364**
- 2.215. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BIND RITE GRAPHICS**
- State the term remaining** DATED: 06/25/15 **BINDRITE ROBBINSVILL**
- List the contract number of any government contract** _____ **100 CASTLE ROAD**
- SECAUCUS NJ 07094-1602**
- 2.216. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BIND RITE GRAPHICS**
- State the term remaining** DATED: 06/25/15 **100 CASTLE ROAD**
- List the contract number of any government contract** _____ **SECAUCUS NJ 07094-1602**
- 2.217. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BINETTE ELECTRIC MOTORS**
- State the term remaining** DATED: 08/23/18 **BINETTE ELECTRIC MOT**
- List the contract number of any government contract** _____ **P O BOX 99**
- BEEBE PLAIN VT 05823-0099**
- 2.218. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BINGHAM TAYLOR**
- State the term remaining** DATED: 10/29/18 **BINGHAM & TAYLOR**
- List the contract number of any government contract** _____ **P O BOX 939**
- CULPEPER VA 22701-0939**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.219. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/29/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BIOFIT ENGINEERED PRODUCTS
BIOFIT ENGINEERED PR
P O BOX 109
WATERVILLE OH 43566-0109 |
| 2.220. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BIO-OREGON
P O BOX 3940
ST ANDREWS NB E5B3S7 |
| 2.221. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/28/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BLEW CHEMICAL
1213 REMINGTON BLVD
ROMEOVILLE IL 60446-6504 |
| 2.222. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/16/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BLUE POINT BREWERY
BLUE POINT BREWING
161 RIVER AVE
PATCHOGUE NY 11772-3304 |
| 2.223. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/11/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BNSF LOGISTICS
B N S F LOGISTICS
P O BOX 173
VERSAILLES OH 45380-0173 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.224. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | MACHINISTS MONEY PURCHASE PENSION PLAN
MONEY PURCHASE PENSION PLAN
EMPLOYER
DATED: JUNE 2018
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BOARD OF TRUSTEES
MACHINISTS MONEY PURCHASE PENSION PLAN
140 SYLVAN AVENUE
SUITE 303
ENGLEWOOD CLIFFS NJ 07632 |
| 2.225. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BOBROW DISTTING
BOBROW DISTRIBUTING
P O BOX 624
CLIFTON PARK NY 12065-0624 |
| 2.226. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BOBS STORES
BOB'S STORES
160 CORPORATE COURT
MERIDEN CT 06450-7177 |
| 2.227. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/04/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BOBS STORES
S D I USA LLC
160 CORPORATE CT
MERIDEN CT 06450-7177 |
| 2.228. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/19
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

BOSH DISTRIBUTION
NUQUEST INTEGRATED S
200 TURNBULL CT
CAMBRIDGE ON N1T1J2
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.229. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/13/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BRANDS U LOVE
473 SAYLOR CT
COVINGTON KY 41015-2506 |
| 2.230. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/20/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BRINKS GLOBAL SERV
BRINKS GLOBAL SERVIC
580 FIFTH AVE
NEW YORK NY 10036-4725 |
| 2.231. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/17/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BRINKS GLOBAL SERV
BRINKS GLOBAL SERVIC
580 FIFTH AVE
NEW YORK NY 10036-4725 |
| 2.232. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BROTHERS INTL FOOD
BROTHERS INTL FOOD C
P O BOX 60679
ROCHESTER NY 14606-0679 |
| 2.233. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BROTHERS INTL FOOD
BROTHERS INTL FOODS
P O BOX 60679
ROCHESTER NY 14606-0679 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.234. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BROTHERS INTL FOOD**
- State the term remaining** DATED: 06/25/15 **PO BOX 60679**
- List the contract number of any government contract** _____ **ROCHESTER NY 14606-0679**
- 2.235. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BROWN CAMPBELL CO**
- State the term remaining** DATED: 06/14/18 **BROWN CAMPBELL**
- List the contract number of any government contract** _____ **11800 INVESTMENT DRI**
- SHELBY TOWNSHIP MI 48315-1794**
- 2.236. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BROWN CAMPBELL CO**
- State the term remaining** DATED: 06/14/18 **BROWN CAMPBELL**
- List the contract number of any government contract** _____ **11800 INVESTMENT DR**
- SHELBY TOWNSHIP MI 48315-1794**
- 2.237. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BROWN PERKINS**
- State the term remaining** DATED: 08/08/16 **BROWN & PERKINS INC**
- List the contract number of any government contract** _____ **P O BOX 412**
- CRANBURY NJ 08512-0412**
- 2.238. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **BRUSHTECH**
- State the term remaining** DATED: 10/28/15 **BRUSHTECH INC**
- List the contract number of any government contract** _____ **P O BOX 1130**
- PLATTSBURGH NY 12901-0068**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.239. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/21/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BUCKLAND CUSTOMS BROKERS
BUCKLAND CUSTOMS BRO
73 GAYLORD RD
ST THOMAS ON N5P3R9
CANADA |
| 2.240. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/09/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BUFFALO ENVELOPE
2914 WALDEN AVE
DEPEW NY 14043 |
| 2.241. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/04/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BURCH MATERIALS
BURCH MATERIALS &
P O BOX 10200
MATTHEWS NC 28106-0220 |
| 2.242. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
BURLINGTON TERMINAL # 17 REAL PROPERTY LEASE -
10807 AVENUE D EXTENSION, WILLISTON, VT 05495
LESSEE
6/30/2025
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BURMONT LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.243. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
BUSH IND
BUSH IND INC
P O BOX 460
JAMESTOWN NY 14702-0460 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.244. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 01/15/19
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C A C ASSC
P M SUPPLY
P O BOX 566
EBENSBURG PA 15931-0566
- 2.245. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 06/25/15
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C A C ASSC
C A C ASSOCIATES
P O BOX 566
EBENSBURG PA 15931-0566
- 2.246. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 05/22/18
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C A ELLIOTT LUMBER
P O BOX 272
ROULETTE PA 16746-0272
- 2.247. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 08/31/17
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C C U INTL
235 RUE LIONEL-GROUI
DRUMMONDVILLE QC J2C6E1
- 2.248. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 06/25/15
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C I FILING SYSTEMS
1130 MILITARY RD
BUFFALO NY 14217-1844

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.249. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/09/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C J KOREA EXPRESS
760 W CROSSROADS PKW
BOLINGBROOK IL 60440 |
| 2.250. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/09/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C M CORP
C & M CORP
349 LAKE ROAD
DAYVILLE CT 06241-1551 |
| 2.251. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/22/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
C T L BROKERAGE
P O BOX 347
NASHUA NH 03061-0347 |
| 2.252. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SIXTH AMENDMENT TO LEASE AGREEMENT
CHICAGO TERMINAL # 37 REAL PROPERTY LEASE - 2300 LANDMEIER RD, ELK GROVE VILLAGE, IL 60007
LESSEE
8/31/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CALEAST NAT, LLC
C/O NORTHAMERICAN TERMINALS MANagements, INC.
ATTN: GENERAL COUNSEL
201 WEST STREET
SUITE 200
ANNAPOLIS MD 21401 |
| 2.253. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/04/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAMPANIA
CAMPANIA INTL
M G N LOGISTICS
712 FERRY ST UNIT 1
EASTON PA 18042-4324 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.254. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAMPANIA
U S TAPE
M G N LOGISTICS
712 FERRY ST UNIT 1
EASTON PA 18042-4324
- State the term remaining** DATED: 02/04/16
- List the contract number of any government contract** _____
- 2.255. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAMPANIA
STEAMIST
M G N LOGISTICS
712 FERRY ST
EASTON PA 18042-4324
- State the term remaining** DATED: 08/04/17
- List the contract number of any government contract** _____
- 2.256. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE - 2875 APPLETON STREET, CAMP HILL, PA 17011
- Nature of debtor's interest** LESSEE CAMPFIL TERMINAL LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 6/30/2025
- List the contract number of any government contract** _____
- 2.257. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CANAMMEX EXHAUST USA
1021 NE 27TH AVE
POMPANO BEACH FL 33062-4221
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.258. **Title of contract** CAPE COD EXPRESS INTERLINE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INTERLINE AGREEMENT
- Nature of debtor's interest** CARRIER CAPE COD EXPRESS, INC.
ALLEN R. SCOTT
VP SALES
1 EXPRESS DRIVE
WAREHAM MA 02671
- State the term remaining** EFFECTIVE DATE: 1/1/2005
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.259. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CAPE COD EXPRESS INTERLINE AGREEMENT
INTERLINE AGREEMENT
CARRIER
EFFECTIVE DATE: 1/1/2007
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPE COD EXPRESS, INC.
ALLEN R. SCOTT
VP SALES
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.260. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CAPE COD EXPRESS INTERLINE AGREEMENT
INTERLINE AGREEMENT
CARRIER
EFFECTIVE DATE: 1/1/2007
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPE COD EXPRESS, INC.
ALLEN R. SCOTT
VP SALES
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.261. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CAPE COD EXPRESS INTERLINE AGREEMENT
INTERLINE AGREEMENT
CARRIER
EFFECTIVE DATE: 1/1/2007
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPE COD EXPRESS, INC.
ALLEN R. SCOTT
VP SALES
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.262. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CAPE COD EXPRESS INTERLINE AGREEMENT
INTERLINE AGREEMENT
CARRIER
EFFECTIVE DATE: 1/1/2007
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPE COD EXPRESS, INC.
ALLEN R. SCOTT
VP SALES
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.263. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CAPE COD EXPRESS INTERLINE AGREEMENT
INTERLINE AGREEMENT
CARRIER
EFFECTIVE DATE: 1/1/2007
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPE COD EXPRESS, INC.
ALLEN R. SCOTT
VP SALES
44 TOBEY ROAD
WAREHAM MA 02571 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.264. **Title of contract** CAPE COD EXPRESS INTERLINE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INTERLINE AGREEMENT
- Nature of debtor's interest** CARRIER CAPE COD EXPRESS, INC.
ALLEN R. SCOTT
VP SALES
44 TOBEY ROAD
WAREHAM MA 02571
- State the term remaining** EFFECTIVE DATE: 1/1/2007
- List the contract number of any government contract** _____
- 2.265. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAPE COD WHOLESALE
CAPE CODE WHOLESALE
195 ROUTE 6A
ORLEANS MA 02653-3240
- State the term remaining** DATED: 05/12/17
- List the contract number of any government contract** _____
- 2.266. **Title of contract** LOCAL FREIGHT TARIFF CPCD 204 N **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SERVICE CONTRACT
- Nature of debtor's interest** CUSTOMER CAPE CODE EXPRESS INC
ALLEN R SCOTT,SALES
44 TOBEY ROAD
WAREHAM PA 02571
- State the term remaining** EFFECTIVE JAN 1, 2002
- List the contract number of any government contract** _____
- 2.267. **Title of contract** LOCAL FREIGHT TARIFF CPCD 204 O **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SERVICE CONTRACT
- Nature of debtor's interest** CUSTOMER CAPE CODE EXPRESS INC
ALLEN R SCOTT,SALES
44 TOBEY ROAD
WAREHAM PA 02571
- State the term remaining** EFFECTIVE JAN 1, 2003
- List the contract number of any government contract** _____
- 2.268. **Title of contract** LOCAL FREIGHT TARIFF CPCD 204 O **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SERVICE CONTRACT
- Nature of debtor's interest** CUSTOMER CAPE CODE EXPRESS INC
ALLEN R SCOTT,SALES
44 TOBEY ROAD
WAREHAM PA 02571
- State the term remaining** EFFECTIVE JAN 1, 2003
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|--------|---|---|
| 2.269. | Title of contract LOCAL FREIGHT TARIFF CPCD 204 P

State what the contract or lease is for SERVICE CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining EFFECTIVE JAN 1, 2004

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
ALLEN R SCOTT, SALES
44 TOBEY ROAD
WAREHAM PA 02571 |
| 2.270. | Title of contract LOCAL FREIGHT TARIFF CPCD 204 P

State what the contract or lease is for SERVICE CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining EFFECTIVE JAN 1, 2004

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
44 TOBEY ROAD
WAREHAM PA 02571 |
| 2.271. | Title of contract LOCAL FREIGHT TARIFF CPCD 204 Q

State what the contract or lease is for SERVICE CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining EFFECTIVE JAN 1, 2005

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
FREDERICK P DAY, VICE PRES
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.272. | Title of contract LOCAL FREIGHT TARIFF CPCD 204 Q

State what the contract or lease is for SERVICE CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining EFFECTIVE JAN 1, 2005

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
FREDERICK P DAY, VICE PRES
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.273. | Title of contract LETTER RE LOCAL TARIFF RATES CPCD-204 S

State what the contract or lease is for SERVICE CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining EFFECTIVE JAN 1, 2007

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
FREDERICK P DAY, VICE PRES
44 TOBEY ROAD
WAREHAM MA 02571 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.274. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LETTER RE LOCAL TARIFF RATES CPCD-204 S

SERVICE CONTRACT

CUSTOMER

EFFECTIVE JAN 1, 2007

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
FREDERICK P DAY, VICE PRES
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.275. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | REVISED CAPE CODE EXPRESS TARIFF CPCD 204-R

SERVICE CONTRACT

CUSTOMER

EFFECTIVE JAN 1, 2007 & REPLACES CPCD 204 S

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
HELEN KOCZERA, OFFICE MGR
44 TOBEY ROAD
WAREHAM MA 02571 |
| 2.276. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LOCAL FREIGHT TARIFF CPCD 204 U

SERVICE CONTRACT

CUSTOMER

EFFECTIVE JAN 1, 2009

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
ALLEN R SCOTT, SALES
1 EXPRESS DRIVE
WAREHAM PA 02571 |
| 2.277. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LOCAL FREIGHT TARIFF CPCD 204 K

SERVICE CONTRACT

CUSTOMER

EFFECTIVE MARCH 3, 1997

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
ALLEN R SCOTT, SALES
44 TOBEY ROAD
WAREHAM PA 02571 |
| 2.278. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LOCAL FREIGHT TARIFF CPCD 204 K

SERVICE CONTRACT

CUSTOMER

EFFECTIVE MARCH 3, 1997

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

CAPE CODE EXPRESS INC
ALLEN R SCOTT, SALES
44 TOBEY ROAD
WAREHAM PA 02571 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.279. **Title of contract** LOCAL FREIGHT TARIFF **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SERVICE CONTRACT
- Nature of debtor's interest** CUSTOMER CAPE CODE EXPRESS INC
ALLEN R SCOTT, SALES
44 TOBEY ROAD
WAREHAM MA 02571
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.280. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAPITAL FOREST PRODS
P O BOX 6213
ANNAPOLIS MD 21401-0213
- State the term remaining** DATED: 09/26/17
- List the contract number of any government contract** _____
- 2.281. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAPITAL FOREST PRODS
P O BOX 6213
ANNAPOLIS MD 21401-0213
- State the term remaining** DATED: 09/26/17
- List the contract number of any government contract** _____
- 2.282. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAPITAL FOREST PRODS
P O BOX 6213
ANNAPOLIS MD 21401-0213
- State the term remaining** DATED: 09/26/17
- List the contract number of any government contract** _____
- 2.283. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAPITAL FOREST PRODS
P O BOX 6213
ANNAPOLIS MD 21401-0213
- State the term remaining** DATED: 09/27/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.284. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAPITAL FOREST PRODS
P O BOX 6213
ANNAPOLIS MD 21401-0213
- State the term remaining** DATED: 11/13/17
- List the contract number of any government contract** _____
- 2.285. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CAPITAL LOGISTICS
CAPITAL LOGISTICS LL
12 WATER ST
WHITE PLAINS NY 10601-1410
- State the term remaining** DATED: 02/08/18
- List the contract number of any government contract** _____
- 2.286. **Title of contract** LETTER OF CREDIT NO. 30004889 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CREDIT AGREEMENT
- Nature of debtor's interest** BORROWER CAPITAL ONE, NATIONAL
ASSOCIATION
RONALD ANDERSEN
275 BROADHOLLOW ROAD
MELVILLE NY 11747
- State the term remaining** EXPIRATION DATE: 03/31/2017
- List the contract number of any government contract** _____
- 2.287. **Title of contract** LETTER OF CREDIT NO. 30004889 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CREDIT AGREEMENT
- Nature of debtor's interest** BORROWER CAPITAL ONE, NATIONAL
ASSOCIATION
RONALD ANDERSEN
275 BROADHOLLOW ROAD
MELVILLE NY 11747
- State the term remaining** EXPIRATION DATE: 03/31/2017
- List the contract number of any government contract** _____
- 2.288. **Title of contract** CORPORATE GUARANTY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** GUARANTY
- Nature of debtor's interest** GUARANTOR CAPITAL ONE, NATIONAL
ASSOCIATION
275 BROADHOLLOW ROAD
MELVILLE NY 11747
- State the term remaining** DATED: 03/15/2016
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.289. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/25/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPSA SOLUTIONS
CAPSA HEALTHCARE
10700 PRAIRE LAKES D
EDEN PRAIRIE MN 55344-3858 |
| 2.290. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AND SECURITY AGREEMENT
BORROWER
4/15/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPTIAL ONE, N.A.
275 BROADHOLLOW RD
MELVILLE NY 11747 |
| 2.291. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE (002)
LOAN AND SECURITY AGREEMENT
BORROWER
4/15/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAPTIAL ONE, N.A.
275 BROADHOLLOW RD
MELVILLE NY 11747 |
| 2.292. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CARDINAL LOGISTICS
P O BOX 480939
CHARLOTTE NC 28203 |
| 2.293. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/21/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CARDINAL TRANSPORTATION
CARDINAL TRANSPORTAT
6209 MID RIVER MALL
SAINT CHARLES MO 63304-1102 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.294. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CARPE INSECTAE
P O BOX 401
SARANAC LAKE NY 12983-0401
- State the term remaining** DATED: 02/03/17
- List the contract number of any government contract** _____
- 2.295. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CARY CO
CARY COMPANY
P O BOX 403
ADDISON IL 60101-0403
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.296. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CASCADE SCHOOL SUPPLY
CASCADE SCHOOL SUPPL
P O BOX 780
NORTH ADAMS MA 01247-0780
- State the term remaining** DATED: 01/29/16
- List the contract number of any government contract** _____
- 2.297. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CASCADE SCHOOL SUPPLY
CASCADE SCHOOL SUPP
P O BOX 780
NORTH ADAMS MA 01247-0780
- State the term remaining** DATED: 02/16/17
- List the contract number of any government contract** _____
- 2.298. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CASCADE SCHOOL SUPPLY
CASCADE SCHOOL SUPPL
P O BOX 780
NORTH ADAMS MA 01247-0780
- State the term remaining** DATED: 08/07/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.299. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/24/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CASUAL MALE RETAIL
109 YORK AVE
RANDOLPH MA 02368-1846 |
| 2.300. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/20/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CATHEDRAL STONE PRODS
CATHEDRAL STONE PROD
19829 HAMILTON AVE
TORRANCE CA 90502-1341 |
| 2.301. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/30/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CAWSTON PRESS STARLITE
CAWSTON PRESS
1165 CROSSROADS PKWY
ROMEOVILLE IL 60446-1166 |
| 2.302. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/08/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CELLUCAP MFG
CELLUCAP MANUFACTURI
P O BOX 2110
NEW YORK NY 10272-2110 |
| 2.303. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/16/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CENTRAL GARDEN PET
CENTRAL GARDEN & PET
P O BOX 682
LOWELL AR 72745-0682 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.304. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | EQUIPMENT SOFTWARE & SERVICES AGREEMENT
SERVICE CONTRACT
CLIENT
JULY 9, 2022
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CENTRIC BUSINESS SYSTEMS
10702 RED RUN BLVD
OWINGS MILLS MD 21117 |
| 2.305. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/08/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CENTROTRADE
CENTROTRADE MINERALS
P O BOX 7899
RICHMOND VA 23231-0399 |
| 2.306. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/27/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CENTURY 21
CENTURY 21 DEPT STOR
P O BOX 425
LOWELL AR 72745-0425 |
| 2.307. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/18/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CENTUTION MEDICAL
CENTURION MEDICAL
PO BOX 7908
ANN ARBOR MI 48107-7908 |
| 2.308. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/05/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CENVEO D L S WORLDWIDE
CENVEO
1000 WINDHAM PKWY
BOLINGBROOK IL 60490-3507 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.309. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/13/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CHAMPION CABLE
CHAMPLAIN CABLE CORP
P O BOX 1010
NASHUA NH 03061-1010 |
| 2.310. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/25/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CHAMPION SPORTS
P O BOX 368
MARLBORO NJ 07746-0368 |
| 2.311. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CHAMPLAIN STONE
P O BOX 650
WARRENSBURG NY 12885-0650 |
| 2.312. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CHAMPLAIN STONE
CHAMPLAIN STONE LTD
P O BOX 650
WARRENSBURG NY 12885 |
| 2.313. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CHAPIN MANF
CHAPIN MANUFACTURING
151 JOHN JAMES AUDUB
AMHERST NY 14228-1111 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.314. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CHARLOTTE PRDUCTS
CHARLOTTE PRODUCTS
6665 COTE DE LIESSE
MONTREAL QC H4V1Z5
- State the term remaining** DATED: 06/14/17
- List the contract number of any government contract** _____
- 2.315. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CHEMTREAT
CHEMTREAT % CTSI-GLO
CLARK TOWER SUITE 17
MEMPHIS TN 38137-4000
- State the term remaining** DATED: 06/15/16
- List the contract number of any government contract** _____
- 2.316. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CHOICE BRANDS
CHOICE ADHESIVES
1260 KARL COURT
WAUCONDA IL 60084-1086
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.317. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CHR BARILLA
BARILLA
CHRLTL
14800 CHARLSON RD
EDEN PRAIRIE MN 55347-5042
- State the term remaining** DATED: 12/23/16
- List the contract number of any government contract** _____
- 2.318. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CHR GITI
GITI
CHRLTL
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55344
- State the term remaining** DATED: 08/31/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.319. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CHR RITTAL
RITTAL
C H ROBINSON
14800 CHARLSON RD
EDEN PRAIRIE MN 55347-5042
- State the term remaining** DATED: 09/19/17
- List the contract number of any government contract** _____
- 2.320. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CHR SCOTTS RETURNS
SCOTTS RETURNS
CHRLTL
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051
- State the term remaining** DATED: 12/22/16
- List the contract number of any government contract** _____
- 2.321. **Title of contract** RENTAL SERVICE AGREEMENT WITH CONTRACT NO. 16675 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SERVICE CONTRACT
- Nature of debtor's interest** CLIENT CINTAS CORPORATION
PO BOX 630910
CINCINNATI OH 45263
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.322. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CITY SPORTS
319 NEWBURYPORT TPKE
ROWLEY MA 01969-1753
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.323. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CLABBER GIRL
5335 W 74TH ST
INDIANAPOLIS IN 46268-4180
- State the term remaining** DATED: 05/13/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.324. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CLABBER GIRL
5335 W 74TH ST
INDIANAPOLIS IN 46268-4180
- State the term remaining** DATED: 05/13/16
- List the contract number of any government contract** _____
- 2.325. **Title of contract** THIRD AMENDMENT OF LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CINCINNATI TERMINAL # 32 REAL PROPERTY LEASE - 2500 COMMERCE BLVD., CINCINNATI, OH 45241
- Nature of debtor's interest** LESSEE CLERMONT HOLDINGS, LLC
JERRY ZIEGELMEYER
9309 MONTGOMERY ROAD
CINCINNATI OH 45242
- State the term remaining** 7/31/2019
- List the contract number of any government contract** _____
- 2.326. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CLIF BAR
CLIF BAR INC
2040 ATLAS STREET
COLUMBUS OH 43228-9645
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.327. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER C-LINE PRODUCTS
C-LINE PRODUCTS INC
P O BOX 5060
FALL RIVER MA 02723-0404
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.328. **Title of contract** CRIME INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 596862231
- Nature of debtor's interest** INSURED CNA
CONTINENTAL INS CO OF NEW JERSEY
151 N FRANKLIN ST
CHICAGO IL 60606
- State the term remaining** 1/1/2020
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.329. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COLE-HAAN
3400 PLAYERS CLB PKW
MEMPHIS TN 38125-8915
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.330. **Title of contract** PROFESSIONAL LIABILITY POLICY WITH POLICY NUMBER 596772089 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED COLUMBIA CASUALTY COMPANY
CLAIMS REPORTING
P O BOX 8317
CHICAGO IL 60680-8317
- State the term remaining** EFFECTIVE MARCH 8, 2018 EXPIRES MARCH 8, 2019
- List the contract number of any government contract** _____
- 2.331. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** COLUMBUS TERMINAL # 31 REAL PROPERTY LEASE - 1700 GEORGESVILLE ROAD, COLUMBUS, OH 43228-3620
- Nature of debtor's interest** LESSEE COLUMBUS TERMINAL LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 4/30/2028
- List the contract number of any government contract** _____
- 2.332. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMCAST
COMCAST INC
18850 8TH AVE S #100
SEATTLE WA 98148-1959
- State the term remaining** DATED: 09/25/15
- List the contract number of any government contract** _____
- 2.333. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMFORTEX CO
P O BOX 100
RANSOMVILLE NY 14131-0100
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.334. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMPACT IND
COMPACT INDUSTRIES
1999 W 75TH STREET #
WOODRIDGE IL 60517-2666
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.335. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMPASS HEALTH
ALL IN ONE WAREHOUSE
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 03/23/18
- List the contract number of any government contract** _____
- 2.336. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMPASS HEALTH
COMPASS HEALTH BRAND
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.337. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMPASS HEALTH
COMPASS HEALTH BRAND
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.338. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMPASS HEALTH
COMPASS HEALTH BRAND
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 10/30/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.339. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER COMPASS HEALTH
COMPASS HEALTH BRAND
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 11/18/15
- List the contract number of any government contract** _____
- 2.340. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CONCORD FOODS
CONCORD FOODS INC
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 09/05/15
- List the contract number of any government contract** _____
- 2.341. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CONCORD FOODS
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 09/05/15
- List the contract number of any government contract** _____
- 2.342. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CONCORD LITHO GROUP
CONCORD DIRECT
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 04/06/18
- List the contract number of any government contract** _____
- 2.343. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONCORD TERMINAL # 20 REAL PROPERTY LEASE - 118 HALL ST, CONCORD, NH 03301
- Nature of debtor's interest** LESSEE CONCORD TERMINAL LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.344. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
INTERLINE TRANSPORTATION AGREEMENT
CO-CARRIER
CAN BE TERMINATED UPON 10 DAYS NOTICE
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONCORD TRANSPORTATION INC
96 DISCO ROAD
ETOBICOKE ON M9W 0A3
CANADA |
| 2.345. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
INTERLINE AGREEMENT
CARRIER
CAN BE TERMINATED UPON 30 DAYS NOTICE
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONCORD TRANSPORTATION INC
96 DISCO ROAD
ETOBICOKE ON M9W 0A3
CANADA |
| 2.346. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
INTERLINE TRANSPORTATION AGREEMENT
CO-CARRIER
CAN BE TERMINATED UPON 30 DAYS NOTICE
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONCORD TRANSPORTATION INC
96 DISCO ROAD
ETOBICOKE ON M9W 0A3
CANADA |
| 2.347. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE AGREEMENT
INTERLINE TRANSPORTATION AGREEMENT
CO-CARRIER
TERMINATED BY MARCH 5, 2008
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONCORD TRANSPORTATION INC
MARK DENNY
105 IRON ST
ETOBICOKE ON M9W 5L9
CANADA |
| 2.348. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE AGREEMENT
INTERLINE TRANSPORTATION AGREEMENT
CO-CARRIER
TERMINATED BY MARCH 5, 2008
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONCORD TRANSPORTATION INC
MARK DENNY
105 IRON ST
ETOBICOKE ON M9W 5L9
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.349. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SHIPPER'S LOAD & COUNT AGREEMENT
COUNT AGREEMENT
CUSTOMER

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONCORD TRANSPORTATION INC
96 DISCO ROAD
ETOBICOKE ON M9W 0A3
CANADA |
| 2.350. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONN STAMPING
CONN SPRING & STAMPI
P O BOX 9336
FALL RIVER MA 02720-0006 |
| 2.351. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONN STAMPING
CONNECTICUT SPRING
P O BOX 9336
FALL RIVER MA 02720-0006 |
| 2.352. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CONSOLIDATED EDISON
P O BOX 1259
SOMERVILLE NJ 08876-1259 |
| 2.353. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COOKIES UNITED
34125 US HWY 19 N #3
PALM HARBOR FL 34684-2115 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.354. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/21/19
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CORNING
P O BOX 17605
SAINT LOUIS MO 63178-7605 |
| 2.355. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/27/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COUNTRY HOME PRODS
D R POWER
P O BOX 25
VERGENNES VT 05491-0025 |
| 2.356. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/31/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COUNTRY LIFE
720 WASHINGTON ST
HANOVER MA 02339-2369 |
| 2.357. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/31/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COUNTRY LIFE
720 WASHINGTON ST
HANOVER MA 02339-2369 |
| 2.358. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/24/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COWAN SYSTEMS
4555 HOLLINS FERRY R
BALTIMORE MD 21227-4610 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.359. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COWAN SYSTEMS PALLET
HEIDELBERG DISTRIBUT
4555 HOLLINS FERRY R
BALTIMORE MD 21227-4610 |
| 2.360. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COWAN SYSTEMS PALLET
OHIO VALLEY WINE &
4555 HOLLINS FERRY R
BALTIMORE MD 21227-4610 |
| 2.361. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/19/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COYOTE BLANKET
COYOTE LOGISTICS
960 N POINT PKWY
SUITE 150
ALPHARETTA GA 30005-4123 |
| 2.362. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/19/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COYOTE GALDERMA
GALDERMA
COYOTE LOGISTICS
960 NORTH POINT PK
ALPHARETTA GA 30005-2034 |
| 2.363. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CRAFT BEER CT
CRAFT BEER GUILD
720 WASHINGTON ST #6
HANOVER MA 02339-2476 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.364. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CRAFT BEER NH
CRAFT BEER GUILD
720 WASHINGTON ST #6
HANOVER MA 02339-2476
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.365. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CRAFT BEER RI
CRAFT BEER GUILD
720 WASHINGTON ST #6
HANOVER MA 02339-2476
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.366. **Title of contract** LAWYERS PROFESSIONAL INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 596772089
- Nature of debtor's interest** INSURED CRC INSURANCE
PROFESSIONAL RISK FACILITIES
113 S. SERVICE ROAD
JERICO NY 11753
- State the term remaining** 3/8/2019
- List the contract number of any government contract** _____
- 2.367. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CREATIVE OFFICE PAVILION
CREATIVE OFFICE
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 07/08/16
- List the contract number of any government contract** _____
- 2.368. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CREPS UNITED PUBLICA
PO BOX 540
EBENSBURG PA 15931-0540
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.369. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CROSMAN CORP
CROSMAN CORPORATION
P O BOX 100
RANSOMVILLE NY 14131-0100
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.370. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CROSMAN CORP
P O BOX 100
RANSOMVILLE NY 14131-0100
- State the term remaining** DATED: 09/07/17
- List the contract number of any government contract** _____
- 2.371. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CROWN PRINCE
CROWN PRINCE INC
11440 CARMEL COMMONS
CHARLOTTE NC 28226-5308
- State the term remaining** DATED: 03/24/16
- List the contract number of any government contract** _____
- 2.372. **Title of contract** COMMERCIAL EXCESS INDEMNITY CONTRACT WITH CONTRACT NO 595-100798-1 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED CRUM & FORSTER
KEITH W. STANISCE CEO
460 WEST 34TH STREET
10TH FL
NEW YORK NY 10001
- State the term remaining** EFFECTIVE APRIL 10, 2018 EXPIRES APRIL 10, 2019
- List the contract number of any government contract** _____
- 2.373. **Title of contract** COMMERCIAL EXCESS INDEMNITY CONTRACT WITH CONTRACT NO 595-100798-1 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED CRUM & FORSTER
KEITH W. STANISCE CEO
460 WEST 34TH STREET
10TH FL
NEW YORK NY 10001
- State the term remaining** EFFECTIVE APRIL 10, 2018 EXPIRES APRIL 10, 2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.374. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CTL BOSHART INDS
BOSHART INDUSTRIES
C T L
P O BOX 1010
NASHUA NH 03061-1010
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.375. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CTL FLOMATIC
FLOMATIC
PO BOX 1010
NASHUA NH 03061-1010
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.376. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CTL MUNRO DIST
MUNRO DISTRIBUTORS
C T L
P O BOX 1010
NASHUA NH 03061-1010
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.377. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CTL MUNRO DIST
MUNRO ELECTRIC
C T L
P O BOX 1010
NASHUA NH 03061-1010
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.378. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CTL MUNRO DIST
REXEL ENERGY SOLUTIO
C T L
P O BOX 1010
NASHUA NH 03061-1010
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.379. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/16/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CTS AMESBURY TRUTH
AMESBURY TRUTH HARDW
P O BOX 190
WINDHAM NH 03087-0190 |
| 2.380. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/16/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CTS AMESBURY TRUTH
BILCO DOOR
P O BOX 190
WINDHAM NH 03087-0190 |
| 2.381. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/09/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CURTIS INDUSTRIES OUTSOURCE
CURIS INDUSTRIES
72 SHARP ST #C-11
HINGHAM MA 02043-4328 |
| 2.382. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/09/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CURTIS INDUSTRIES OUTSOURCE
CURTIS CAB
72 SHARP ST #C-11
HINGHAM MA 02043-4328 |
| 2.383. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/09/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
CURTIS INDUSTRIES OUTSOURCE
CUSRTIS INDUSTRIES
72 SHARP ST #C-11
HINGHAM MA 02043-4328 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.384. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CURTIS INDUSTRIES OUTSOURCE
CURTIS INDUSTRIES
72 SHARP ST #C-11
HINGHAM MA 02043-4328
- State the term remaining** DATED: 08/04/17
- List the contract number of any government contract** _____
- 2.385. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CUSTOM GLASS % LYNNCO
S R G GLOBAL/C G S
P O BOX 12759
PORTLAND OR 97212-0759
- State the term remaining** DATED: 12/29/15
- List the contract number of any government contract** _____
- 2.386. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CUSTOM GLASS % LYNNCO
S R G GLOBAL/C G S
P O BOX 12759
PORTLAND OR 97212-0759
- State the term remaining** DATED: 12/29/15
- List the contract number of any government contract** _____
- 2.387. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CUSTOM GLASS % LYNNCO
S R G GLOBAL/C G S
P O BOX 12759
PORTLAND OR 97212-0759
- State the term remaining** DATED: 12/29/15
- List the contract number of any government contract** _____
- 2.388. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER CYMAX R T T LOGISTICS
CYMAX
300 DATA COURT
DUBUQUE IA 52003-8963
- State the term remaining** DATED: 04/26/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.389. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/04/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

D C M
D C M PRODUCTS
3574 KEMPER RD
CINCINNATI OH 45241-2009 |
| 2.390. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

D H X
545 OHLONE PKWY
WATSONVILLE CA 95076-6685 |
| 2.391. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/19/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DAIKIN AMER INC
P O BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.392. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/08/19
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DAIKIN APPLIED
DAIKEN APPLIED
P O BOX 9319
DES MOINES IA 50306-9319 |
| 2.393. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DANBY PRODUCTS
505 CONSUMERS RD #60
TORONTO ON M3J4V8
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.394. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DANBY PRODUCTS
505 CONSUMERS RD #60
TORONTO ON M2J4Z2
CANADA
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.395. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DANNON WATER
141 S MERIDIAN ST #2
INDIANAPOLIS IN 46225-1027
- State the term remaining** DATED: 05/09/16
- List the contract number of any government contract** _____
- 2.396. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DANNON WATER
D W A
141 S MERIDIAN ST #2
INDIANAPOLIS IN 46225-1027
- State the term remaining** DATED: 05/10/17
- List the contract number of any government contract** _____
- 2.397. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DAP INC
28915 CLEMENS RD
WESTLAKE OH 44145-1122
- State the term remaining** DATED: 08/28/18
- List the contract number of any government contract** _____
- 2.398. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DAVID EDWARDS BLUE GRACE
DAVID EDWARD
2846 S FALKENBURG RD
RIVERVIEW FL 33568
- State the term remaining** DATED: 10/21/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.399. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DAVID GOODING INC
205 W GROVE ST #F
MIDDLEBORO MA 02346-1462
- State the term remaining** DATED: 03/17/17
- List the contract number of any government contract** _____
- 2.400. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DAVID GOODING INC
205 W GROVE ST #F
MIDDLEBORO MA 02346-1462
- State the term remaining** DATED: 06/23/17
- List the contract number of any government contract** _____
- 2.401. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DAYTON PARTS
7800 B ALLENTOWN BLV
HARRISBURG PA 17112
- State the term remaining** DATED: 08/09/16
- List the contract number of any government contract** _____
- 2.402. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DELAGAR
P O BOX 277
ROUSES POINT NY 12979-0277
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.403. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DELPHI
5335 W 74TH ST
INDIANAPOLIS IN 46268-4180
- State the term remaining** DATED: 05/22/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.404. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DELTA PRODUCTS
1213 REMINGTON BLVD
ROMEONVILLE IL 60446-6504
- State the term remaining** DATED: 01/28/19
- List the contract number of any government contract** _____
- 2.405. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DEMOBAGS
1500 DISTANT AVE #21
BURLINGTON MA 01803
- State the term remaining** DATED: 10/20/16
- List the contract number of any government contract** _____
- 2.406. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DENCO
P O BOX 277
ROUSES POINT NY 12979-0277
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.407. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DENSO
DENSO PRODS SVCS AME
P O BOX 183850
SHELBY TOWNSHIP MI 48318-3850
- State the term remaining** DATED: 12/23/16
- List the contract number of any government contract** _____
- 2.408. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DESPERATE ENTERPRISES
DESPERATE ENTERPRISE
800 RIDGEWOOD BLVD
HUDSON OH 44236-1686
- State the term remaining** DATED: 05/03/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.409. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/25/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DEXTER-RUSSELL
DEXTER RUSSELL
P O BOX 6543
CHELMSFORD MA 01824-6543 |
| 2.410. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/16/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DIAGEO
P O BOX 9349
LOUISVILLE KY 40209-0349 |
| 2.411. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/16/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DIAGEO
P O BOX 9349
LOUISVILLE KY 40209-0349 |
| 2.412. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/16/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DIAGEO
P O BOX 9349
LOUISVILLE KY 40209-0349 |
| 2.413. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DIRECT METALS LLC
P O BOX 420529
ATLANTA GA 30342-0529 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.414. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | AGREEMENT

EMPLOYER AGREEMENT

EMPLOYER

3/9/2019

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DISTRICT LODGE # 15, LOCAL #447
652 FOURTH AVE
SECOND FLOOR
BROOKLYN NY 11201 |
| 2.415. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | AGREEMENT BTWN NEMF, BALTIMORE, MD AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO

UNION EMPLOYER AGREEMENT

EMPLOYER

1/4/2010

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DISTRICT LODGE #15, LOCAL #447
INTERNATIONAL ASSOCIATION OF MACHINISTS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232 |
| 2.416. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | AGREEMENT BTWN NEMF, CAMP HILL, PA AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS

UNION EMPLOYER AGREEMENT

EMPLOYER

7/2/2019

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DISTRICT LODGE #15, LOCAL #447
INTERNATIONAL ASSOCIATION OF MACHINISTS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232 |
| 2.417. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | AGREEMENT BY AND BTWN LOCAL 447 OF DIST. 15 OF THE INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO AND NEMF, INC. 110 SODOM ROAD MILTON, PA 17847

UNION AGREEMENT

EMPLOYER

8/11/2019

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

DISTRICT LODGE #15, LOCAL #447
INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|--|---|---|
| 2.418. | Title of contract | NEW ENGLAND MOTOR FREIGHT, 1919 PLANTATION ROAD NE, ROANOKE, VA, 24012 AND DISTRICT 15, I.A.M. & A.W., 652 FOURTH AVE. BROOKLYN, NY 11232, PHILADELPHIA OFFICE, LOCAL 447, I.A.M. & A.W. 3460 N. DELAWARE AVENUE, ROOM 106, PHILADELPHIA, PA. 19134 | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232 |
| | Nature of debtor's interest | EMPLOYER | |
| | State the term remaining | 1/23/2019 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.419. | Title of contract | AGREEMENT BTWN NEMF BALTIMORE, MD AND LOCAL LODGE 447, DISTRICT15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232 |
| | Nature of debtor's interest | EMPLOYER | |
| | State the term remaining | 1/4/2020 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.420. | Title of contract | AGREEMENT BTWN NEMF, FORT WAYNE, IN AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232 |
| | Nature of debtor's interest | EMPLOYER | |
| | State the term remaining | 11/11/2022 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.421. | Title of contract | AGREEMENT BTWN NEMF, FORT WAYNE, IN AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232 |
| | Nature of debtor's interest | EMPLOYER | |
| | State the term remaining | 11/11/2022 | |
| | List the contract number of any government contract | _____ | |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

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|--------|--|--|---|
| 2.422. | Title of contract | AGREEMENT BTWN NEMF, ELK GROVE VILLAGE AND CHANNAHAN AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 12/31/2022 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |
| | | | |
| 2.423. | Title of contract | AGREEMENT BTWN NEMF, ELK GROVE VILLAGE AND CHANNAHAN AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 12/31/2022 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |
| | | | |
| 2.424. | Title of contract | AGREEMENT BTWN NEMF, INDIANAPOLIS, IN AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 2/28/2023 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |
| | | | |
| 2.425. | Title of contract | AGREEMENT BTWN NEMF, INDIANAPOLIS, IN AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 2/28/2023 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

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|--------|--|---|---|
| 2.426. | Title of contract | COLLECTIVE BARGAINING AGREEMENT BTWN DIST. 15, LOCAL LODGE 447, INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO AND NEMF, ELIZABETH, NJ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 2022 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |
| | | | |
| 2.427. | Title of contract | AGREEMENT BTWN NEW ENGLAND MOTOR FREIGHT, INC. 1606 UNION AVENUE PENNSAUKEN, NEW JERSEY 08110 AND DISTRICT LODGE # 15, LOCAL #447 | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 3/9/2019 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |
| | | | |
| 2.428. | Title of contract | AGREEMENT BTWN NEMF TONAWANDA, NY AND ROCHESTER, NY AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 4/15/2022 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |
| | | | |
| 2.429. | Title of contract | AGREEMENT BTWN NEMF, TONAWANDA, NY AND ROCHESTER, NY, AND FALCONER, NY, AND LOCAL 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 4/15/2022 | 2ND FLOOR |
| | List the contract number of any government contract | _____ | BROOKLYN NY 11232 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.430. **Title of contract** AGREEMENT BTWN NEMF ALBANY, NY AND WILLISTON, VT AND LOCAL LODGE 447, DISTRICT15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 4/8/2022
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- DISTRICT LODGE #15, LOCAL #447
INTERNATIONAL ASSOCIATION OF
MACHINISTS AND AEROSPACE
WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.431. **Title of contract** AGREEMENT BTWN NEMF ALBANY, NY AND WILLISTON, VT AND LOCAL LODGE 447, DISTRICT15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 4/8/2022
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- DISTRICT LODGE #15, LOCAL #447
INTERNATIONAL ASSOCIATION OF
MACHINISTS AND AEROSPACE
WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.432. **Title of contract** COLLECTIVE BARGAINING AGREEMENT BTWN DIST. 15, LOCAL LODGE 447, INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO AND NEMF, OLD BETHPAGE, NY
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 5/11/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- DISTRICT LODGE #15, LOCAL #447
INTERNATIONAL ASSOCIATION OF
MACHINISTS AND AEROSPACE
WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.433. **Title of contract** COLLECTIVE BARGAINING AGMT BTWN LOCAL 447 OF DISTRICT 15 OF THE INTERNATIONAL ASSOCIATION OF MACHINSTS AND AEROSPACE WORKERS,AFL-CIO AND NEW ENGLAND MOTOR FREIGHT, INC AND NEMF, OLD BETHPAGE, NY
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 5/11/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- DISTRICT LODGE #15, LOCAL #447
INTERNATIONAL ASSOCIATION OF
MACHINISTS AND AEROSPACE
WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|--|---|---|
| 2.434. | Title of contract | COLLECTIVE BARGAINING AGREEMENT BTWN DIST. 15, LOCAL LODGE 447, INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO AND NEMF, NEWBURGH, NY | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 6/19/2022 | 2ND FLOOR |
| | List the contract number of any government contract | <hr/> | BROOKLYN NY 11232 |
| | | | |
| 2.435. | Title of contract | COLLECTIVE BARGAINING AGMT BTWN LOCAL 447 OF DISTRICT 15 OF THE INTERNATIONAL ASSOCIATION OF MACHINSTS AND AEROSPACE WORKERS,AFL-CIO AND NEW ENGLAND MOTOR FREIGHT, INC AND NEMF, NEWBURGH, NY | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 6/19/2022 | 2ND FLOOR |
| | List the contract number of any government contract | <hr/> | BROOKLYN NY 11232 |
| | | | |
| 2.436. | Title of contract | COLLECTIVE BARGAINING AGMT BTWN LOCAL 447 OF DISTRICT 15 OF THE INTERNATIONAL ASSOCIATION OF MACHINSTS AND AEROSPACE WORKERS,AFL-CIO AND NEW ENGLAND MOTOR FREIGHT, INC AND NEMF, ELIZABETH, NJ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 6/30/2022 | 2ND FLOOR |
| | List the contract number of any government contract | <hr/> | BROOKLYN NY 11232 |
| | | | |
| 2.437. | Title of contract | AGREEMENT BTWN NEMF CAMP HILL, PA AND LOCAL LODGE 447, DISTRICT15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | UNION EMPLOYER AGREEMENT | DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS |
| | Nature of debtor's interest | EMPLOYER | 652 FOURTH AVENUE |
| | State the term remaining | 7/2/2019 | 2ND FLOOR |
| | List the contract number of any government contract | <hr/> | BROOKLYN NY 11232 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.438. **Title of contract** NEW ENGLAND MOTOR FREIGHT, 1919 PLANTATION ROAD NE, ROANOKE, VA, 24012 AND DISTRICT 15, I.A.M. & A.W., 652 FOURTH AVE. BROOKLYN, NY 11232, PHILADELPHIA OFFICE, LOCAL 447, I.A.M. & A.W. 3460 N. DELAWARE AVENUE, ROOM 106, PHILADELPHIA, PA. 19134
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 7/23/2019
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.439. **Title of contract** AGREEMENT BY AND BETWEEN LOCAL 447 OF DISTRICT 15 OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO AND NEW ENGLAND MOTOR FREIGHT, INC., ROUTE 902 AND MAHONING STREET, LEHIGHTON, PA, 18235
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 8/11/2019
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.440. **Title of contract** AGREEMENT BY AND BETWEEN LOCAL 447 OF DISTRICT 15 OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO AND NEW ENGLAND MOTOR FREIGHT, INC. 110 SODOM ROAD MILTON, PENNSYLVANIA 17847
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 8/11/2019
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.441. **Title of contract** AGREEMENT BTWN NEMF, BELLE, WV AND LOCAL LODGE 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 8/11/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.442. **Title of contract** AGREEMENT BTWN NEMF BELLE, WV AND LOCAL LODGE 447, DISTRICT 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** 8/11/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.443. **Title of contract** AGREEMENT BTWN NEMF, SHARONVILLE, OH, RICHFIELD, OH, COLUMBUS, OH, TOLEDO, OH AND LOCAL 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** VARIOUS
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.444. **Title of contract** AGREEMENT BTWN NEMF, SHARONVILLE, OH, RICHFIELD, OH, COLUMBUS, OH, TOLEDO, OH AND LOCAL 447, DIST. 15 INTERNATIONAL ASSOC. OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO
- State what the contract or lease is for** UNION EMPLOYER AGREEMENT
- Nature of debtor's interest** EMPLOYER
- State the term remaining** VARIOUS
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DISTRICT LODGE #15, LOCAL #447 INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS
652 FOURTH AVENUE
2ND FLOOR
BROOKLYN NY 11232
- 2.445. **Title of contract** LEASE AGREEMENT
- State what the contract or lease is for** PUERTO RICO TERMINAL # 88 REAL PROPERTY LEASE - PUERTO RICO, CENTRO MERCANTIL INTERNACIONAL, EDIF 5 LOCAL 1, GUAYNABO, PR 00966-3919
- Nature of debtor's interest** LESSEE
- State the term remaining** MONTH TO MONTH
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DM EXPRESS
URB GARDEN HILLS
CALLE MEADOW LANE 5
GUAYNABO PR 00966
- 2.446. **Title of contract** CERTIFICATE OF LIABILITY INSURANCE WITH CERTIFICATE NO. 47123249 DATED FEB 20, 2019
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED
- State the term remaining** _____
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
DMC INSURANCE INC
10475 CROSSPOINT BOULEVARD
STE 220
INDIANAPOLIS IN 46256

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.447. **Title of contract** CERTIFICATE OF LIABILITY INSURANCE
State what the contract or lease is for CERTIFICATE OF LIABILITY INSURANCE
Nature of debtor's interest INSURED
State the term remaining 4/10/2019
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DMC INSURANCE, INC.
10475 CROSSPOINT BLVD.
SUITE 220
INDIANAPOLIS IN 42656
- 2.448. **Title of contract** CERTIFICATE OF LIABILITY INSURANCE
State what the contract or lease is for CERTIFICATE OF LIABILITY INSURANCE
Nature of debtor's interest INSURED
State the term remaining 4/10/2019
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DMC INSURANCE, INC.
10475 CROSSPOINT BLVD.
SUITE 220
INDIANAPOLIS IN 42656
- 2.449. **Title of contract** EXCESS INDEMNITY CONTRACT
State what the contract or lease is for TRUCKERS INDEMMITY CONTRACT
Nature of debtor's interest INSURED
State the term remaining 4/10/2019
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DMC INSURANCE, INC.
10475 CROSSPOINT BLVD.
SUITE 220
INDIANAPOLIS IN 42656
- 2.450. **Title of contract** CARTAGE AGREEMENT
State what the contract or lease is for CONTRACTOR AGREEMENT
Nature of debtor's interest CARRIER
State the term remaining CAN BE TERMINATED WITH 20 DAYS WRITTEN NOTICE
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DOHRN TRANSFER COMPANY
625 3RD AVENUE
ROCK ISLAND IL 61201
- 2.451. **Title of contract** CARTAGE AGREEMENT
State what the contract or lease is for CONTRACTOR AGREEMENT
Nature of debtor's interest CARRIER
State the term remaining CAN BE TERMINATED WITH 20 DAYS WRITTEN NOTICE
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DOHRN TRANSFER COMPANY
625 3RD AVENUE
ROCK ISLAND IL 61201

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.452. **Title of contract** CARTAGE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONTRACTOR AGREEMENT
- Nature of debtor's interest** CARRIER DOHRN TRANSFER COMPANY
625 3RD AVENUE
ROCK ISLAND IL 61201
- State the term remaining** CAN BE TERMINATED WITH 20 DAYS WRITTEN NOTICE
- List the contract number of any government contract** _____
- 2.453. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DORMAN PRODUCTS
P O BOX 30382
CLEVELAND OH 44130-0382
- State the term remaining** DATED: 12/27/18
- List the contract number of any government contract** _____
- 2.454. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DORMAN PRODUCTS
P O BOX 30382
CLEVELAND OH 44130-0382
- State the term remaining** DATED: 12/27/18
- List the contract number of any government contract** _____
- 2.455. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DOUBLE ENVELOPE
872 LEE HIGHWAY
ROANOKE VA 24019-8516
- State the term remaining** DATED: 09/21/18
- List the contract number of any government contract** _____
- 2.456. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DOW CHEMICAL
DOW CHEMICAL/DOW AGR
P O BOX 5159
PORTLAND OR 97201
- State the term remaining** DATED: 04/18/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

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- 2.457. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 04/18/16
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DOW CHEMICAL
ROHM & HAAS
PO BOX 5159
PORTLAND OR 97208-5159
- 2.458. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 05/14/18
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DURA LAST ROOFING SIMPLIFIED
DURO-LAST ROOFING
P O BOX 40088
BAY VILLAGE OH 44140-0088
- 2.459. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 07/08/17
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DURA PLASTICS
DURA PLASTIC PRODUCT
12651 HIGH BLUFF DR
SAN DIEGO CA 92130-2024
- 2.460. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 10/28/15
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DURA-BAR METAL SVC
DURA-BAR METAL SVCS
P O BOX 9490
FALL RIVER MA 02720-0015
- 2.461. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 02/02/18
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
DURABLE CASTER BLUEGRACE
DURABLE CASTER
2846 S FALKENBURG RD
RIVERVIEW FL 33568

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.462. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER DURABLE CASTER BLUEGRACE
DURABLE CASTERS
2846 S FALKENBURG RD
RIVERVIEW FL 33568
- State the term remaining** DATED: 02/02/18
- List the contract number of any government contract** _____
- 2.463. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER E M D CHEMICALS
P O BOX 77065
MADISON WI 53562
- State the term remaining** DATED: 05/05/16
- List the contract number of any government contract** _____
- 2.464. **Title of contract** ANNUAL SERVICE AND SUPPLY MAINTENANCE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SERVICE CONTRACT
- Nature of debtor's interest** CLIENT EAGLE SYSTEMS INC
2421 HARLEM ROAD
BUFFALO NY 14426
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.465. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER EARTH FRIENDLY PRODS
SIMPLIFIED
EARTH FRIENDLY PRODS
P O BOX 40088
BAY VILLAGE OH 44140-0088
- State the term remaining** DATED: 12/12/18
- List the contract number of any government contract** _____
- 2.466. **Title of contract** SECUIRTY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SECURITY AGREEMENT
- Nature of debtor's interest** BORROWER EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101
- State the term remaining** DATED: 01/27/2016
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

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|--------|---|--|---|
| 2.467. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SECUIRTY AGREEMENT
SECURITY AGREEMENT
BORROWER
DATED: 05/04/2015
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101 |
| 2.468. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SECUIRTY AGREEMENT
SECURITY AGREEMENT
BORROWER
DATED: 05/04/2018
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101 |
| 2.469. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SECUIRTY AGREEMENT
SECURITY AGREEMENT
BORROWER
DATED: 07/8/2016
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101 |
| 2.470. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SECUIRTY AGREEMENT
SECURITY AGREEMENT
BORROWER
DATED: 11/16/2016
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101 |
| 2.471. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SECUIRTY AGREEMENT
SECURITY AGREEMENT
BORROWER
DATED: 12/10/2015
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.472. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SECUIRTY AGREEMENT
SECURITY AGREEMENT
BORROWER
DATED: 12/15/2015
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101 |
| 2.473. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | IRREVOCABLE LETTER OF CREDIT NO. 15OSL03306
CREDIT AGREEMENT
BORROWER
EXPIRATION DATE: 04/10/2016
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
LOAN SERVICING DEPT
9300 FLAIR DRIVE
6TH FL
EL MONTE CA 91731 |
| 2.474. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | IRREVOCABLE LETTER OF CREDIT NO. 15OSL03306
CREDIT AGREEMENT
BORROWER
EXPIRATION DATE: 04/10/2016
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
LOAN SERVICING DEPT
9300 FLAIR DRIVE
6TH FL
EL MONTE CA 91731 |
| 2.475. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | SECURITY AGREEMENT 34200004009
LOAN AGREEMENT
BORROWER
04/15/2022
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ANDY GEROT
2475 NORTHWINDS PARKWAY
SUITE 330
ALPHARETTA GA 30009 |
| 2.476. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INSTALLMENT NOTE
LOAN AGREEMENT
BORROWER
12/15/2023
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
PO BOX 1406
ALPHARETTA GA 30009 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.477. Title of contract INSTALLMENT NOTE
State what the contract or lease is for LOAN AND SECURITY AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining 08/15/2022
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101
- 2.478. Title of contract SECURTY AGREEMENT
State what the contract or lease is for SECURITY AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining DATED: 03/29/2016
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101
- 2.479. Title of contract SECURITY AGREEMENT
State what the contract or lease is for LOAN AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining DATED: 04/09/2015
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
135 NORTH LOS ROBLES AVENUE
7TH FL
PASADENA CA 91101
- 2.480. Title of contract SECURTY AGREEMENT
State what the contract or lease is for SECURITY AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining DATED: 04/09/2015
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101
- 2.481. Title of contract SECURTY AGREEMENT
State what the contract or lease is for SECURITY AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining DATED: 04/10/2015
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EAST WEST BANK
ATTN: ANDY GEROT, VP
135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.482. **Title of contract** SECUIRTY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SECURITY AGREEMENT
- Nature of debtor's interest** BORROWER EAST WEST BANK
- State the term remaining** DATED: 04/10/2015 ATTN: ANDY GEROT, VP
- List the contract number of any government contract** _____ 135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101
- 2.483. **Title of contract** SECUIRTY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SECURITY AGREEMENT
- Nature of debtor's interest** BORROWER EAST WEST BANK
- State the term remaining** DATED: 04/10/2015 ATTN: ANDY GEROT, VP
- List the contract number of any government contract** _____ 135 NORTH LOS ROBLES AVE
7TH FLOOR
PASADENA CA 91101
- 2.484. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER EASTERN MOUNTAIN SPORTS
- State the term remaining** DATED: 02/25/16 EASTERN MOUNTAIN SPO
- List the contract number of any government contract** _____ PO BOX 9133
CHELSEA MA 02150-9133
- 2.485. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER EASTERN MOUNTAIN SPORTS
- State the term remaining** DATED: 03/23/16 EASTERN MOUNTAIN SPO
- List the contract number of any government contract** _____ PO BOX 9133
CHELSEA MA 02150-9133
- 2.486. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER EASTMAN MACHINE
- State the term remaining** DATED: 06/25/15 P O BOX 100
- List the contract number of any government contract** _____ RANSOMVILLE NY 14131-0100

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.487. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/15/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EASTWOOD CO MGN LOGISTICS
EASTWOOD COMPANY
712 FERRY ST
EASTON PA 18042-4324 |
| 2.488. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/30/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EASTWOOD CO MGN LOGISTICS
EASTWOOD COMPANY
712 FERRY ST
EASTON PA 18042-4324 |
| 2.489. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/25/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO ARCHWAY SALES
ARCHWAY SALES
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60601 |
| 2.490. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/14/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO BLANKET
ECHO GLOBAL LOGISTIC
600 W CHICAGO #830
CHICAGO IL 60610-2422 |
| 2.491. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/14/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO HOLLINGER
HOLLINGER CORP
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60610 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.492. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO HUCK FINN
HUCK FINN CLOTHES
ECHO GLOBAL LOGISTI
600 W CHICAGO
CHICAGO IL 60610 |
| 2.493. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/18/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO LOG - HOUSEHOLD GOOD
HOUSEHOLD GOODS
ECHO GLOBAL
600 W CHICAGO AVE
CHICAGO IL 60654-2801 |
| 2.494. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO M HOLLAND
M HOLLAND
ECHO GLOBAL LOGISTI
600 W CHICAGO AVE #7
CHICAGO IL 60654-2522 |
| 2.495. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/23/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO NVC CHAIR LIFT
N V C CHAIR LIFT
ECHO GLOBAL LOGISTI
600 W CHICAGO AVE #7
CHICAGO IL 60654-2522 |
| 2.496. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/27/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO OMRON HEALTHCARE
OMRON ELECTRONICS
ECHO GLOBAL LOGISTI
600 W CHICAGO AVE #7
CHICAGO IL 60654-2522 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.497. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ECHO OMRON HEALTHCARE
OMRON HEALTHCARE
ECHO GLOBAL LOGISTI
600 W CHICAGO AVE #7
CHICAGO IL 60654-2522
- State the term remaining** DATED: 04/22/16
- List the contract number of any government contract** _____
- 2.498. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ECHO PEXCO
PEXCO
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60610
- State the term remaining** DATED: 07/20/17
- List the contract number of any government contract** _____
- 2.499. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ECHO PEXCO
PEXCO
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60610
- State the term remaining** DATED: 10/14/15
- List the contract number of any government contract** _____
- 2.500. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ECHO SAMUEL STRAPPING
SAMUEL STRAPPING
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60610
- State the term remaining** DATED: 10/14/15
- List the contract number of any government contract** _____
- 2.501. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ECHO T M FITZGERALD
T M FITZGERALD
ECHO GLOBAL
600 W CHICAGO AVE #7
CHICAGO IL 60654-2822
- State the term remaining** DATED: 10/14/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.502. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/14/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO T M FITZGERALD
T M FITZGERALD
ECHO GLOBAL
600 W CHICAGO AVE #7
CHICAGO IL 60654-2822 |
| 2.503. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/14/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ECHO TIRE RACK
TIRE RACK
ECHO GLOBAL LOGISTI
600 W CHICAGO AVE #7
CHICAGO IL 60654-2801 |
| 2.504. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/06/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EDWARD DON
EDWARD DON & CO
360 W BUTTERFIELD RD
ELMHURST IL 60126-5068 |
| 2.505. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/06/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EDWARD DON
360 W BUTTERFIELD RD
ELMHURST IL 60126-5068 |
| 2.506. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
EDWARD R HAMILTON
P O BOX 219
GOSHEN CT 06756-0219 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.507. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ELARA FOODS
ELARA FOOD SERVICE
43570 GARFIELD RD #1
CLINTON TOWNSHIP MI 48038-1153
- State the term remaining** DATED: 03/23/16
- List the contract number of any government contract** _____
- 2.508. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ELEKTRISOLA
425 WATERTOWN RD SUI
NEWTON MA 02458-1131
- State the term remaining** DATED: 09/23/15
- List the contract number of any government contract** _____
- 2.509. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER EMERSON HEALTHCARE
GEODIS
P O BOX 2208
BRENTWOOD TN 37024-2208
- State the term remaining** DATED: 03/20/18
- List the contract number of any government contract** _____
- 2.510. **Title of contract** LINE OF COVERAGE POLICY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. ELD30000307701
- Nature of debtor's interest** INSURED ENDURANCE AMERICAN
SPECIALTY
1221 AVENUE OF THE AMERICAS
NEW YORK NY 10020
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- 2.511. **Title of contract** PROPERTY/B&M **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. ARL100116927000
- Nature of debtor's interest** INSURED ENDURANCE AMERICAN
SPECIALTY
1221 AVENUE OF THE AMERICAS
NEW YORK NY 10020
- State the term remaining** 8/31/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.512. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | SURPLUS LINES NOTICE WITH POLICY NO. ELD30000307701

INSURANCE CONTRACT

INSURED

4/10/2019

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ENDURANCE AMERICAN SPECIALTY INSURANCE COMPANY
1221 AVENUE OF THE AMERICAS
NEW YORK NY 10020 |
| 2.513. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | AGREEMENT WITH POLICY NO. ARL10011692701

INSURANCE CONTRACT

INSURED

8/31/2019

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ENDURANCE AMERICAN SPECIALTY INSURANCE COMP-ANY
1221 AVENUE OF THE AMERICAS
NEW YORK NY 10020 |
| 2.514. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 03/23/16

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ENVIRONMENT ONE
ENVIRONMENT ONE CORP
300 WAMPANOAG TRAIL
RIVERSIDE RI 02915-2200 |
| 2.515. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | UMBRELLA - EXCESS (3RD)

POLICY NO. MKLV3EVE100215

INSURED

4/10/2019

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

EVANSTON INSURANCE CO
10 PARKWAY NORTH
DEERFIELD IL 60015 |
| 2.516. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | COMMERCIAL EXCESS LIABILITY WITH POLICY NUMBER MKLV3EUE100215

INSURANCE CONTRACT

INSURED

4/10/2019

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

EVANSTON INSURANCE COMPANY
10 PARKWAY NORTH
DEERFIELD IL 60015 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.517. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/22/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

F C I
P O BOX 1208
MAULDIN SC 29662-1208 |
| 2.518. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

F P P F CHEM CO
F P P F CHEMICAL CO
151 JOHN JAMES AUDOB
AMHERST NY 14228 |
| 2.519. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
PORTLAND TERMINAL # 18 REAL PROPERTY LEASE - 7
MANSON LIBBY RD, PORTLAND, ME 04074-8983
LESSEE
12/31/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

FAIR TERMINAL CORP.
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.520. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

FARMERS CHOICE FOOD
PROMOTION IN MOTION
30 HEMLOCK DRIVE
CONGERS NY 10920-1402 |
| 2.521. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

FARMERS CHOICE FOOD
30 HEMLOCK DRIVE
CONGERS NY 10920-1402 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.522. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263
- State the term remaining** DATED: 07/07/2016 MATURITY DATE: 07/15/2023
- List the contract number of any government contract** _____
- 2.523. **Title of contract** MASTER LOAN AND SECURITY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER FIFTH THIRD BANK
FIFTH THIRD EQUIPMENT FINANCE COMPANY
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263
- State the term remaining** DATED: 08/09/2011
- List the contract number of any government contract** _____
- 2.524. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263
- State the term remaining** DATED: 08/09/2011 / MATURITY DATE: 09/15/2018
- List the contract number of any government contract** _____
- 2.525. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263
- State the term remaining** DATED: 08/15/2013 / MATURITY DATE: 08/15/2018
- List the contract number of any government contract** _____
- 2.526. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263
- State the term remaining** DATED: 09/11/2017 / MATURITY DATE: 09/15/2022
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.527. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
01/15/2022
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.528. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
10/15/2020
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.529. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
10/15/2021
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.530. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
DATED: 10/17/2013 / MATURITY DATE: 11/01/2018
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.531. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
DATED: 10/18/2017 MATURITY DATE: 11/15/2024
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

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|--------|---|---|--|
| 2.532. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
DATED: 10/26/2011 / MATURITY DATE: 11/15/2018
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.533. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
11/15/2022
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.534. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
12/1/2022
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.535. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
01/01/2024
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.536. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
DATED: 12/12/2011 / MATURITY DATE: 12/15/2018
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.537. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
DATED: 12/15/2011 / MATURITY DATE: 01/15/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.538. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
DATED: 12/23/2011 / MATURITY DATE: 01/15/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.539. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
04/15/2023
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.540. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
02/15/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
38 FOUNTAIN SQ PLAZA
MD 10904A
CINCINNATI OH 45263 |
| 2.541. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
02/15/2023
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.542. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
03/01/2022
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.543. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
03/15/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
38 FOUNTAIN SQ PLAZA
MD 10904A
CINCINNATI OH 45263 |
| 2.544. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
03/15/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.545. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
04/15/2022
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.546. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
04/15/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.547. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
04/15/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.548. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
05/15/2018
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.549. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
05/15/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.550. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
06/01/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.551. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
07/01/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.552. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
07/15/2018
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.553. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
07/15/2022
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
MAIL DROP 10904A
38 FOUNTAIN SQUARE PLAZA
CINCINNATI OH 45263 |
| 2.554. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
11/15/2021
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
38 FOUNTAIN SQ PLAZA
MD 10904A
CINCINNATI OH 45263 |
| 2.555. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | PROMISSORY NOTE
LOAN AGREEMENT
BORROWER
12/15/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FIFTH THIRD BANK
38 FOUNTAIN SQ PLAZA
MD 10904A
CINCINNATI OH 45263 |
| 2.556. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/27/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FINISH LINE
P O BOX 621
BOYERTOWN PA 19512-0621 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.557. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FINISHMASTER
P O BOX 21248
EAGAN MN 55121-0248
- State the term remaining** DATED: 12/29/16
- List the contract number of any government contract** _____
- 2.558. **Title of contract** EXCESS LIABILITY POLICY WITH POLICY NUMBER SHX000-4905-5965 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED FIREMAN'S FUND INSURANCE
COMPANIES
P.O. BOX 777
NOVATO CA 94998
- State the term remaining** EFFECTIVE APRIL 10, 2018 EXPIRES APRIL 10, 2019
- List the contract number of any government contract** _____
- 2.559. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FIRESTONE BLDG PRODS
TRANSPLACE
FIRESTONE BLDG PRODS
PO BOX 3001
NAPERVILLE IL 60566-7001
- State the term remaining** DATED: 01/22/18
- List the contract number of any government contract** _____
- 2.560. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FISHER PRINTING TRANSPLACE
FISHER PRINTING
P O BOX 425
LOWELL AR 72745-0425
- State the term remaining** DATED: 01/22/18
- List the contract number of any government contract** _____
- 2.561. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FLAVOR & FRAGRANCE
FLAVOR & FRAGRANCE S
KEYSTONE DEDICATED
P O BOX 752
CARNEGIE PA 15106-0752
- State the term remaining** DATED: 10/08/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.562. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **FLAVOR & FRAGRANCE**
- State the term remaining** DATED: 10/08/15 **FLAVOR & FRAGRANCES**
- List the contract number of any government contract** _____ **KEYSTONE DEDICATED**
CARNEGIE PA 15106-0752
- 2.563. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **FORMS & SURFACES**
- State the term remaining** DATED: 02/04/16 **M G N LOGISTICS**
- List the contract number of any government contract** _____ **712 FERRY STREET**
EASTON PA 18042-4324
- 2.564. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **FORMS & SURFACES**
- State the term remaining** DATED: 02/04/16 **M G N LOGISTICS**
- List the contract number of any government contract** _____ **712 FERRY STREET**
EASTON PA 18042-4324
- 2.565. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** FORT WAYNE TERMINAL # 07 REAL PROPERTY LEASE
- Nature of debtor's interest** LESSEE **FORT WAYNE TERMINAL LLC**
- State the term remaining** MONTH TO MONTH **C/O AMZ MANAGEMENT LLC**
- List the contract number of any government contract** _____ **1-71 NORTH AVENUE EAST**
ELIZABETH NJ 07201
- 2.566. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **FORWARD FOODS**
- State the term remaining** DATED: 12/11/15 **DETOUR BARS**
- List the contract number of any government contract** _____ **TRANS INSIGHT**
P O BOX 23000
HICKORY NC 28603-0230

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.567. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/11/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FORWARD FOODS
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.568. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/11/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FORWARD FOODS
TRANSPORTATION INSI
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.569. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/22/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FORWARD FOODS
DETOUR BARS
TRANSPORTATION INSI
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.570. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/22/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FORWARD FOODS
TRANSPORTATION INSI
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.571. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/22/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FORWARD FOODS
TRANSPORTATION INSI
P O BOX 23000
HICKORY NC 28603-0230 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.572. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FRAZER JONES
FRAZER & JONES
P O BOX 3065
SYRACUSE NY 13220-3065
- State the term remaining** DATED: 05/20/16
- List the contract number of any government contract** _____
- 2.573. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FREDONIA LANDSTAR
FREDONIA
13410 SUTTON PARK S
JACKSONVILLE FL 32224-5270
- State the term remaining** DATED: 10/06/17
- List the contract number of any government contract** _____
- 2.574. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FREIGHT COWBOY
P O BOX 4601
HOUSTON TX 77210-4601
- State the term remaining** DATED: 11/08/16
- List the contract number of any government contract** _____
- 2.575. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FRESENIUS MEDICAL CARE
FRESENIUS MEDICAL CA
604 SALEM RD
ETTERS PA 17319-8908
- State the term remaining** DATED: 01/10/18
- List the contract number of any government contract** _____
- 2.576. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER FREUDENBERG
FREUDENBERG HOUSEHOL
39550 THIRTEEN MILE
NOVI MI 48377-2360
- State the term remaining** DATED: 03/23/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.577. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/31/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FRIANT AND ASSOCIATES MODE TRANS
FRIANT & ASSOCIATES
P O BOX 2914
CONROE TX 77305-2914 |
| 2.578. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/17/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FUJI ELECTRIC CORP
TRANSLOGISTICS
FUJI ELECTRIC CORP
321 N FURNACE ST
BIRDSBORO PA 19508-2057 |
| 2.579. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/17/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
FUJI ELECTRIC CORP
TRANSLOGISTICS
FUJI ELECTRIC CORP
321 N FURNACE ST
BIRDSBORO PA 19508-2057 |
| 2.580. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
G F HEALTH
G F HEALTH PRODS
30 HEMLOCK DR
CONGERS NY 10920-1402 |
| 2.581. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
G F HEALTH
G F HEALTH PRODS
30 HEMLOCK DR
CONGERS NY 10920-1402 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.582. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/14/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

G G H S
GRIFFIN GREENHOUSE
P O BOX 123
AKRON PA 17501-0123 |
| 2.583. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

G G H S
G G HS
P O BOX 123
AKRON PA 17501-0123 |
| 2.584. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/03/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GAIAM
345 HIGH STREET STE
HAMILTON OH 45011-6071 |
| 2.585. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/22/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GAIAM
FIT FOR LIFE
345 HIGH STREET STE
HAMILTON OH 45011-6071 |
| 2.586. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | THIRD PARTY CLAIMS ADMINISTRATION AGREEMENT
SERVICE CONTRACT
CLIENT
EFFECTIVE MARCH 31, 2017 UNTIL TERMINATED BY EITHER PARTY
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GALLAGHER BASSETT SERVICES
INC
LEGAL DEPARTMENT
2850 GOLF ROAD
ROLLING MEADOWS IL 60008 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.587. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | THIRD PARTY CLAIMS ADMINISTRATION AGREEMENT DATED MARCH 31, 2018

SERVICE CONTRACT

CLIENT

EXPIRES MARCH 31, 2019

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GALLAGHER BASSETT SERVICES INC
LEGAL DEPARTMENT
2850 GOLF ROAD
ROLLING MEADOWS IL 60008 |
| 2.588. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 04/21/17

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GARNIER THIEBAUT
GARNIER THIEBAUT
7905 RALSTON RD #100
ARVADA CO 80002-2465 |
| 2.589. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 12/19/16

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GASCH PRINTING AMER GROUP
GASCH PRINTING
25 S ARIZONA PL #300
CHANDLER AZ 85224 |
| 2.590. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 03/25/17

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GEA PROCESS ENGINEERING
G E A PROCESS ENGINE
802 FAR HILLS DR
NEW FREEDOM PA 17349-8428 |
| 2.591. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 03/25/17

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

GEA PROCESS ENGINEERING
NIRO ATOMIZER INC
802 FAR HILLS DR
NEW FREEDOM PA 17349-8428 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.592. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **GEBRUDER WEISS**
- State the term remaining** DATED: 12/12/18 **KILLERSPIN**
- List the contract number of any government contract** _____ **251 WILLE RD #C**
DES PLAINES IL 60016
- 2.593. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **GEL SPICE**
- State the term remaining** DATED: 06/25/15 **372 E KENNEDY BLVD**
LAKEWOOD NJ 08701-1434
- List the contract number of any government contract** _____
- 2.594. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **GENERAC FIRST MILE CHRLTL**
- State the term remaining** DATED: 01/24/19 **POOL WW GENERAC FIRS**
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051
- List the contract number of any government contract** _____
- 2.595. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **GENERAC FIRST MILE CHRLTL**
- State the term remaining** DATED: 01/24/19 **POOL WW GENERAC FIRS**
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051
- List the contract number of any government contract** _____
- 2.596. **Title of contract** EXCESS LOSS INSURANCE FOR CONTRACT NO. GL-0017-VU **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED **GERBER LIFE INSURANCE**
- State the term remaining** EFFECTIVE JAN 1, 2019 EXPIRES DEC 31, 2019 **COMPANY**
1311 MAMARONECK AVENUE
WHITE PLAINS NY 10603
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.597. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/13/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GERFLOR FLOORING
P O BOX 578
CRYSTAL LAKE IL 60039-0578 |
| 2.598. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/08/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GILCHREST AND SOAMES
P O BOX 166
EAST DUBUQUE IL 61025-0166 |
| 2.599. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GILCHRIST SOAMES
GILCHRIST & SOAMES
300 DATA COURT
DUBUQUE IA 52003-8963 |
| 2.600. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GLOBAL SHIPPING SVCS
1304 SWELL FARM DRIV
HANOVER MD 21076-1636 |
| 2.601. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/16/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GLOBAL TRANZ BLANKET
KEYSHIP EXPRESS
GLOBAL TRANZ
P O BOX 6348
SCOTTSDALE AZ 85261-6348 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.602. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER GLOBAL TRANZ BLANKET L P S
- State the term remaining** DATED: 09/29/16 GLOBAL TRANZ P O BOX 6348 SCOTTSDALE AZ 85261-6348
- List the contract number of any government contract** _____
- 2.603. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER GLOBAL TRANZ BLANKET GLOBALTRANZ GT FRGHT AUDIT PYMT P O BOX 6348 SCOTTSDALE AZ 85258-1013
- State the term remaining** DATED: 12/01/15
- List the contract number of any government contract** _____
- 2.604. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER GLOBAL TRANZ BLANKET L P S
- State the term remaining** DATED: 12/28/16 731 BIELENBERG DR #108 WOODBURY MN 55125-1701
- List the contract number of any government contract** _____
- 2.605. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER GOODCO PRODUCTS GOODCO PRODUCTS LLC P O BOX 348 JAFFREY NH 03452-0348
- State the term remaining** DATED: 05/05/16
- List the contract number of any government contract** _____
- 2.606. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER GOODWEST GOODWEST IND 210 SUMMIT AVE MONTVALE NJ 07645-1579
- State the term remaining** DATED: 09/04/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.607. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **GORDON LOGISTICS**
- State the term remaining** DATED: 09/06/18 **BROTHERS INTL FOOD**
- List the contract number of any government contract** _____ **305 FOBES BLVD**
- _____ **MANSFIELD MA 02048**
- 2.608. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **GRAPHIC CONTROLS-LLC**
- State the term remaining** DATED: 06/25/15 **151 JOHN J AUDUBON P**
- List the contract number of any government contract** _____ **AMHERST NY 14228**
- _____
- 2.609. **Title of contract** UMBRELLA - EXCESS (4TH) **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. EXC2275071
- Nature of debtor's interest** INSURED **GREAT AMERICAN ASSURANCE CO**
- State the term remaining** 4/10/2019 **301 E. FOURTH ST.**
- List the contract number of any government contract** _____ **CINCINNATI OH 45202**
- _____
- 2.610. **Title of contract** GREAT AMERICAN INSURANCE POLICY WITH POLICY NUMBER EXC2275071 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED **GREAT AMERICAN ASSURANCE COMPANY**
- State the term remaining** EFFECTIVE APRIL 10, 2018 EXPIRES APRIL 10, 2019 **301 E FOURTH ST**
- List the contract number of any government contract** _____ **CINCINNATI OH 45202**
- _____
- 2.611. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **GREEN BAY PKG**
- State the term remaining** DATED: 06/25/15 **GREEN BAY PACKAGING**
- List the contract number of any government contract** _____ **PO BOX 28346**
- _____ **GREEN BAY WI 54324-0346**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.612. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/09/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GROUND FORCE LOGISTICS
OCCUNOMIX
50 PARK PL #820
NEWARK NJ 07102-4301 |
| 2.613. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/04/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GROWTH ENHANCER CONSULT
GROWTH ENHANCER CONS
P O BOX 8995
ROANOKE VA 24014-0776 |
| 2.614. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/22/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GT MOBILE CANNING
MOBILE CANNING SYS
GLOBALTRANZ
P O BOX 6348
SCOTTSDALE AZ 85251 |
| 2.615. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/01/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GT WORLD CENTRIC
WORLD CENTRIC
GLOBAL TRANZ
P O BOX 71730
PHOENIX AZ 85050-1013 |
| 2.616. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/01/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
GT WORLD CENTRIC
WORLD CENTRIC
GLOBAL TRANZ
P O BOX 6348
SCOTTSDALE AZ 85258 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.617. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER H B D/THERMOID
H B D/THERMOID INC
P O BOX 540
EBENSBURG PA 15931-0540
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.618. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER H B S
HEALTHY BODY SVCS
85 NORTH POINT PARKW
AMHERST NY 14228-1886
- State the term remaining** DATED: 06/16/17
- List the contract number of any government contract** _____
- 2.619. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER H FOX & CO
GOLD PURE FOOD PRODU
416 THATFORD AVE
BROOKLYN NY 11212-5810
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.620. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER H H G D
975 COBB PLACE BLVD
KENNESAW GA 30144-6848
- State the term remaining** DATED: 09/19/17
- List the contract number of any government contract** _____
- 2.621. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER H N I
H N I CORP
P O BOX 3001
NAPERVILLE IL 60566-7001
- State the term remaining** DATED: 08/04/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.622. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 11/17/17
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HAMILTON HOME BROUSSARD
HAMILTON HOME PROD
P O BOX 4601
HOUSTON TX 77210-4601
- 2.623. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 05/16/18
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HANOVER ARCHITECTURAL
GLOBALTRANZ
HANOVER ARCHITECTURA
P O BOX 6348
SCOTTSDALE AZ 85261-6348
- 2.624. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 05/16/18
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HANOVER ARCHITECTURAL
GLOBALTRANZ
HANOVER ARCHITECTURA
P O BOX 6348
SCOTTSDALE AZ 85261-6348
- 2.625. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 03/24/16
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HANOVER TERMINAL
HANOVER TERMINAL INC
P O BOX 77
HANOVER PA 17331-0077
- 2.626. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 06/25/15
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HANOVER TERMINAL
HANOVER TERMINAL INC
P O BOX 77
HANOVER PA 17331-0077

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.627. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HANOVER TERMINAL
HANOVER TERMINAL INC
PO BOX 77
HANOVER PA 17331-0077
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.628. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HARO BICYCLE CORP
1230 AVENIDA CHELSEA
VISTA CA 92083
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.629. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HARRISON HOSE AND TUBING
HARRISON HOSE & TUBI
P O BOX 9386
TRENTON NJ 08650-1386
- State the term remaining** DATED: 09/26/17
- List the contract number of any government contract** _____
- 2.630. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HARRY W GAFFNEY CO
HARRY W GAFFNEY & CO
9100 STATE RD
PHILADELPHIA PA 19136-1618
- State the term remaining** DATED: 02/01/19
- List the contract number of any government contract** _____
- 2.631. **Title of contract** AGREEMENT EFFECTIVE MARCH 31, 2018 WITH POLICY NO. 10 WN S35800 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED HART INSURANCE COMPANY OF
THE MIDWEST
ONE HARTFORD PLAZA, T-7
HARTFORD CT 06155
- State the term remaining** EXPIRES MARCH 31, 2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.632. **Title of contract** WC-AOS 10WN-S35800 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. WC-AOS 10WN-S35800
- Nature of debtor's interest** INSURED HARTFORD FIRE INSURANCE CO
ONE HARTFORD PLAZA
HARTFORD CT 06155-0001
- State the term remaining** 4/30/2019
- List the contract number of any government contract** _____
- 2.633. **Title of contract** FLOOD INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 99015129052019
- Nature of debtor's interest** INSURED HARTFORD FIRE INSURANCE CO
ONE HARTFORD PLAZA
HARTFORD CT 06155-0001
- State the term remaining** 11/9/2019
- List the contract number of any government contract** _____
- 2.634. **Title of contract** AUTO INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 10CSES35802
- Nature of debtor's interest** INSURED HARTFORD FIRE INSURANCE CO
ONE HARTFORD PLAZA
HARTFORD CT 06155-0001
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- 2.635. **Title of contract** COMMERCIAL AUTOMOBILE INSURANCE WITH POLICY NUMBER 10 CSE S35802 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED HARTFORD FIRE INSURANCE COMPANY
HARTFORD PLAZA
HARTFORD CT 06155
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- 2.636. **Title of contract** AGREEMENT DATED MARCH 31, 2018 TO MARCH 31, 2019 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED HARTFORD FIRE INSURANCE COMPANY
THOMAS S MAKUCH
ONE HARTFORD PLAZA
HARTFORD CT 06155
- State the term remaining** 4/30/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.637. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HEALTH CARE LOGISTICS
HEALTH CARE LOGISTIC
P O BOX 77065
MADISON WI 53707-1065
- State the term remaining** DATED: 10/10/15
- List the contract number of any government contract** _____
- 2.638. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HEARTLAND FOOD PRODS
7220 W 98TH TERRACE
OVERLAND PARK KS 66212-2255
- State the term remaining** DATED: 10/08/18
- List the contract number of any government contract** _____
- 2.639. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HEATCRAFT WORLDWIDE UNYSON
HEATCRAFT WORLDWIDE
2000 CLEARWATER DR
OAK BROOK IL 60523-8809
- State the term remaining** DATED: 02/27/17
- List the contract number of any government contract** _____
- 2.640. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HEB CONSOLIDATION
H E B CONSOLIDATION
P O BOX 682
LOWELL AR 72745-0682
- State the term remaining** DATED: 07/18/15
- List the contract number of any government contract** _____
- 2.641. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HERMES ABRASIVES
P O BOX 2545
VIRGINIA BEACH VA 23450-2545
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.642. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/27/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HERR FOODS ZIPLINE LOGISTICS
HERR FOODS
2300 W 5TH AVE
COLUMBUS OH 43215-1003 |
| 2.643. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/27/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HERR FOODS ZIPLINE LOGISTICS
HERR FOODS
2300 W 5TH AVE
COLUMBUS OH 43215-1003 |
| 2.644. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/04/19
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HERTZ FURNITURE - PROMPT
HERTZ FURNITURE
212 SECOND ST #205A
LAKEWOOD NJ 08701-3683 |
| 2.645. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/05/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HERTZ FURNITURE - PROMPT
HERTZ FURNITURE
212 SECOND ST #205A
LAKEWOOD NJ 08701-3683 |
| 2.646. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/05/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HERTZ FURNITURE - PROMPT
HERTZ FURNITURE SYST
111 CLIFTON AVE
LAKEWOOD NJ 08701-3342 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.647. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/04/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

HESSEY SEATING
HUSSEY SEATING
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.648. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/04/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

HESSEY SEATING
HUSSEY SEATING CO
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.649. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/30/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

HIGHLAND COMPUTER FORMS
HIGHLAND COMPUTER F
1025 W MAIN ST
HILLSBORO OH 45133-0831 |
| 2.650. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/23/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

HILLIARD CORP
HILLARD CORP
P O BOX 3065
SYRACUSE NY 13220-3065 |
| 2.651. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/10/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

HILLIARD CORP
P O BOX 30382
CLEVELAND OH 44130-0382 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.652. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HILLIARD CORP
HILLARD CORP
P O BOX 100
RANSOMVILLE NY 14131-0100 |
| 2.653. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/06/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HINDLEPOWER IL2000
HINDLE POWER
P O BOX 2545
VIRGINIA BEACH VA 23450-2545 |
| 2.654. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HINKLEY LIGHTING
19801 HOLLAND RD #A
BROOK PARK OH 44142-1339 |
| 2.655. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HITACHI CABLE
HITACHI CABLE AMERIC
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.656. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HOHMANN AND BARNARD
HOHMANN & BARNARD
P O BOX 1010
NASHUA NH 03061-1010 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.657. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/20/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HOHMANN BARNARD NY
HOHMANN & BARNARD IN
P O BOX 1010
NASHUA NH 03061-1010 |
| 2.658. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
PLAINFIELD TERMINAL # 12 REAL PROPERTY LEASE -
310 HOLLYWOOD AVENUE, SOUTH PLAINFIELD, NJ
07080-4202
LESSEE
5/31/2024
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HOLLYWOOD CORP
C/O 1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.659. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/04/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HON FURNITURE
P O BOX 3001
NAPERVILLE IL 60566-7001 |
| 2.660. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/14/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HONEYMOON PAPER PROD
KINGSGATE LOG
HONEYMOON PAPER PROD
9100 W CHESTER TOWNE
WEST CHESTER OH 45069-3108 |
| 2.661. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/02/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HONEYWELL
H B T/S P S
P O BOX 3001
NAPERVILLE IL 60566-7001 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.662. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HONEYWELL
HONEYWELL AEROSPACE
P O BOX 3001
NAPERVILLE IL 60566-7001
- State the term remaining** DATED: 04/02/18
- List the contract number of any government contract** _____
- 2.663. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HONEYWELL
HONEYWELL PERFORMANC
P O BOX 3001
NAPERVILLE IL 60566-7001
- State the term remaining** DATED: 04/02/18
- List the contract number of any government contract** _____
- 2.664. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HONEYWELL
HONEYWELL TRANSPORTA
P O BOX 3001
NAPERVILLE IL 60566-7001
- State the term remaining** DATED: 04/02/18
- List the contract number of any government contract** _____
- 2.665. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HOP AND WINE
HOP & WINE BEVERAGE
8500 W 110TH ST #300
OVERLAND PARK KS 66210-1804
- State the term remaining** DATED: 04/15/16
- List the contract number of any government contract** _____
- 2.666. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER HOP AND WINE
HOP & WINE BEVERAGE
8500 W 110TH ST #300
OVERLAND PARK KS 66210-1804
- State the term remaining** DATED: 04/19/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.667. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HOSHINO
HOSHINO (U S A) INC
P O BOX 752
CARNEGIE PA 15106-0752 |
| 2.668. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HUBBARD HALL INC
P O BOX 219
GOSHEN CT 06756-0219 |
| 2.669. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/30/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HUBBELL WIRING
P O BOX 1259
SOMERVILLE NJ 08876-1259 |
| 2.670. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HUBERT
P O BOX 538702
CINCINNATI OH 45253-8702 |
| 2.671. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/07/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HUSQVARNA
HUSQVARNA FOREST & G
P O BOX 67
SAINT LOUIS MO 63166-0067 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.672. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 12/22/16
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HUSQVARNA
P O BOX 67
SAINT LOUIS MO 63166-0067
- 2.673. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 06/25/15
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
HUTZLER MFG
P O BOX 1005
FARMINGTON CT 06034-1005
- 2.674. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 04/29/16
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
I T W POLYERS
I T W POLYMERS SEALE
360 W BUTTERFIELD RD
ELMHURST IL 60126-5041
- 2.675. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 03/16/17
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ICYNENE
P O BOX 2208
BRENTWOOD TN 37024-2208
- 2.676. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 04/13/18
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ICYNENE
ICYNENE LAPOLLA
P O BOX 2208
BRENTWOOD TN 37024-2208

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.677. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER IIMAK
P O BOX 100
RANSOMVILLE NY 14131-0100
- State the term remaining** DATED: 08/02/16
- List the contract number of any government contract** _____
- 2.678. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER IIMAK
P O BOX 100
RANSOMVILLE NY 14131-0100
- State the term remaining** DATED: 08/02/16
- List the contract number of any government contract** _____
- 2.679. **Title of contract** UMBRELLA - EXCESS (1ST) **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. G7111711A001
- Nature of debtor's interest** INSURED ILLINOIS UNION INSURANCE
525 WEST MONROE STREET
CHICAGO IL 60661
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- 2.680. **Title of contract** ACE CATASTROPHE LIABILITY PLUS POLICY WITH POLICY NO. G7111711A001 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED ILLINOIS UNION INSURANCE
COMPANY
525 WEST MONROE ST., STE 400
CHICAGO IL 60661
- State the term remaining** EFFECTIVE 4/10/2018 EXPIRE 4/10/2019
- List the contract number of any government contract** _____
- 2.681. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER IMERYS CORP
P O BOX 100
RANSOMVILLE NY 14131-0100
- State the term remaining** DATED: 03/30/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.682. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER IMEX GLOBAL SOLUTION
4752 W CALIFORNIA AV
SALT LAKE CITY UT 84104-4498
- State the term remaining** DATED: 12/11/15
- List the contract number of any government contract** _____
- 2.683. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER IMPERIAL BAG
P O BOX 362
CUYAHOGA FALLS OH 44221
- State the term remaining** DATED: 10/08/15
- List the contract number of any government contract** _____
- 2.684. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER IMPERIAL MARBLE
1213 REMINGTON BLVD
ROMEOLVILLE IL 60446-6504
- State the term remaining** DATED: 06/14/18
- List the contract number of any government contract** _____
- 2.685. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER INDEPENDENT CONTAINER
P O BOX 1644
DOYLESTOWN PA 18901-0257
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.686. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER INDEPENDENT METAL
TECH LOGISTICS
P O BOX 431
MILFORD NH 03055-0431
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.687. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/10/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INDIUM CORPORATION
GERMANIUM CORP
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.688. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/10/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INDIUM CORPORATION
INDIUM CORP OF AMER
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.689. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/10/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INDIUM CORPORATION
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.690. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/10/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INDIUM CORPORATION
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.691. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/10/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INDIUM CORPORATION
P O BOX 23000
HICKORY NC 28603-0230 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.692. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/28/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INDUSTRIAL TRACTOR AST
INDUSTRIAL TRACTOR P
P O BOX 540
EBENSBURG PA 15931-0540 |
| 2.693. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/22/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INSPIRED BEAUTY BRANDS
CHRLTL
INSPIRED BEAUTY BRAN
CHRLTL
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051 |
| 2.694. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INTERCHEZ
TOYOTA
P O BOX 2115
STOW OH 44224-0115 |
| 2.695. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INVERNESS MEDICAL LL
ALERE NORTH AMERICA
P O BOX 1066
POINT PLEASANT NJ 08742-1066 |
| 2.696. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
INVERNESS MEDICAL LL
FIRST CHECK DIAGNOST
PO BOX 1066
POINT PLEASANT NJ 08742-1066 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.697. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **INVERNESS MEDICAL LL**
- State the term remaining** DATED: 06/25/15 **SHORE MANUFACTURING**
- List the contract number of any government contract** _____ **P O BOX 1066**
POINT PLEASANT NJ 08742-1066
- 2.698. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **INVERNESS MEDICAL LL**
- State the term remaining** DATED: 06/25/15 **PO BOX 1066**
POINT PLEASANT NJ 08742-1066
- List the contract number of any government contract** _____
- 2.699. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **IOVATE**
- State the term remaining** DATED: 03/23/16 **CHRLTL**
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55344
- List the contract number of any government contract** _____
- 2.700. **Title of contract** POLLUTION POLICY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 2746700
- Nature of debtor's interest** INSURED **IRONSHORE SPECIALTY INS CO**
- State the term remaining** 4/28/2019 **75 FEDERAL ST, 5TH FL**
BOSTON MA 02110
- List the contract number of any government contract** _____
- 2.701. **Title of contract** AGREEMENT WITH POLICY NO. 002746700 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED **IRONSHORE SPECIALTY**
- State the term remaining** EXPIRES APRIL 28, 2019 **INSURANCE COMPANY**
- List the contract number of any government contract** _____ **75 FEDERAL ST**
5TH FLOOR
BOSTON MA 02110

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.702. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ITT XYLEM
I T T
2 CORPORATE DRIVE
PALM COAST FL 32137-4712
- State the term remaining** DATED: 03/31/16
- List the contract number of any government contract** _____
- 2.703. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER J & K CORP
J & K CORPORATION
9810A MEDLOCK BRIDGE
DULUTH GA 30097-4405
- State the term remaining** DATED: 09/05/15
- List the contract number of any government contract** _____
- 2.704. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER J B HUNT BLANKET
J B HUNT
P O BOX 682
LOWELL AR 72745-0682
- State the term remaining** DATED: 04/13/17
- List the contract number of any government contract** _____
- 2.705. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE - 51 DELTA DRIVE, PAWTUCKET, RI 02860
- Nature of debtor's interest** LESSEE JAFRAY REALTY INC
C/O PASCAL SERVICE
CORPORATION
51 DELTA DRIVE
PAWTUCKET RI 02860
- State the term remaining** MONTH TO MONTH
- List the contract number of any government contract** _____
- 2.706. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER JARRETT SHIFFLER EQUIPMENT
SHIFFLER EQUIPMENT
1347 N MAIN STREET
ORRVILLE OH 44667-9761
- State the term remaining** DATED: 03/19/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.707. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER JB HUNT ORTHOCLINICAL DIAGNOSTICS
- State the term remaining** DATED: 04/22/16 ORTHO CLINICAL DIAGN
- List the contract number of any government contract** _____ P O BOX 682 LOWELL AR 72745-0682
- 2.708. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER JOEYS FINE FOODS
- State the term remaining** DATED: 12/06/17 30 VILLAGE CT HAZLET NJ 07730-1533
- List the contract number of any government contract** _____
- 2.709. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER JOHN ZIDIAN SPECIALT
- State the term remaining** DATED: 06/25/15 SUMMER GARDEN FOOD M
- List the contract number of any government contract** _____ 574 MCCLURG ROAD BOARDMAN OH 44512-6405
- 2.710. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER JOHNSON CONTROLS SMITH
- State the term remaining** DATED: 10/12/18 TRANSFER
- List the contract number of any government contract** _____ JOHNSON CONTROLS 1300 SAWGRASS CORP P SUNRISE FL 33323-2823
- 2.711. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER JOHNSON CONTROLS SMITH
- State the term remaining** DATED: 10/12/18 TRANSFER
- List the contract number of any government contract** _____ JOHNSON CONTROLS 1300 SAWGRASS CORP P SUNRISE FL 33323-2823

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.712. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 09/13/18
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- JOHNSON GAS C H ROBINSON
JOHNSON GAS
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051
- 2.713. **Title of contract** LEASE AGREEMENT
- State what the contract or lease is for** BUFFALO TERMINAL # 58 REAL PROPERTY LEASE - 4110 GRAND ISLAND BLVD, TONAWANDA, NY 14150-6505
- Nature of debtor's interest** LESSEE
- State the term remaining** MONTH TO MONTH
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- JON S CORPORATION
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.714. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- JOTUL
PO BOX 100
RANSOMVILLE NY 14131-0100
- 2.715. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 02/24/17
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- JOWITT AND RODGERS
360 WEST BUTTERFIELD
ELMHURST IL 60126-5068
- 2.716. **Title of contract** INTERIM LEASE SCHEDULE NO. 1000141185
- State what the contract or lease is for** LEASE AGREEMENT
- Nature of debtor's interest** LESSEE
- State the term remaining** DATED: 02/09/2016
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMNBUS OH 43240

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.717. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERIM -FUNDING REQUEST
LEASE AGREEMENT
LESSEE
DATED: 05/02/2016
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.718. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERIM -FUNDING REQUEST
LEASE AGREEMENT
LESSEE
DATED: 08/09/2016
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.719. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERIM -FUNDING REQUEST
LEASE AGREEMENT
LESSEE
DATED: 10/14/2016
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.720. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERIM -FUNDING REQUEST
LEASE AGREEMENT
LESSEE
DATED: 11/11/2016
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.721. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERIM -FUNDING REQUEST
LEASE AGREEMENT
LESSEE
DATED: 11/25/2016
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.722. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE MODIFICATION AGREEMENT
CREDIT AGREEMENT
BORROWER
EXPIRATION DATE: 06/30/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
695 ROUTE 46
1ST FL
FAIRFIELD NJ 07004 |
| 2.723. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE MODIFICATION AGREEMENT
CREDIT AGREEMENT
BORROWER
EXPIRATION DATE: 06/30/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
695 ROUTE 46
1ST FL
FAIRFIELD NJ 07004 |
| 2.724. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FINANCING LEASE
AMENDED LEASE AGREEMENT
LESSEE
MASTER LEASE AGMT DATED: 04/23/2014 - 96 MONTHS
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.725. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERIM-FUNDING REQUEST
LEASE AGREEMENT
LESSEE

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.726. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERIM LEASE SCHEDULE NO. 1000141185
LEASE AGREEMENT
LESSEE

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.727. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FINANCING LEASE
LEASE AGREEMENT
LESSEE
60 MONTHS
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.728. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FINANCING LEASE
LEASE AGREEMENT
LESSEE
60 MONTHS
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.729. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FINANCING LEASE
LEASE AGREEMENT
LESSEE
84 MONTHS
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.730. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FINANCING LEASE
LEASE AGREEMENT
LESSEE
96 MONTHS
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |
| 2.731. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FINANCING LEASE
LEASE AGREEMENT
LESSEE
96 MONTHS
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.732. **Title of contract** MASTER LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE AGREEMENT
- Nature of debtor's interest** LESSEE JPMORGAN CHASE BANK, N.A.
MAIL CODE OH1-1085
1111 POLARIS PARKWAY
SUITE A3
COLUMBUS OH 43240
- State the term remaining** AT LEAST 90 DAYS NOTICE
- List the contract number of any government contract** _____
- 2.733. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER JUNGBUNZLAUR TRANS INSIGHT
JUNGBUNZLAUR
P O BOX 1566
PLYMOUTH MA 02362-1566
- State the term remaining** DATED: 11/05/18
- List the contract number of any government contract** _____
- 2.734. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER K T M SCHNEIDER
K T M NORTH AMERICA
P O BOX 982262
EL PASO TX 79998-2262
- State the term remaining** DATED: 08/04/17
- List the contract number of any government contract** _____
- 2.735. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER K Y B AMERICAS
130 E MAIN STREET
NEW ALBANY IN 47150-5857
- State the term remaining** DATED: 05/27/16
- List the contract number of any government contract** _____
- 2.736. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER KARS NUTS
1727 GEORGESVILLE RD
COLUMBUS OH 43228-3619
- State the term remaining** DATED: 02/15/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.737. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/22/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KATE FARMS MATSON LOG
KATE FARMS
P O BOX 6450
VILLA PARK IL 60181-6450 |
| 2.738. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/19/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KDL TOTAL LUBRICANTS
TOTAL LUBRICANTS
K D L
P O BOX 752
CARNEGIE PA 15106-0752 |
| 2.739. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/19/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KDL TOTAL LUBRICANTS
TOTAL SPECIALTIES
K D L
P O BOX 752
CARNEGIE PA 15106-0752 |
| 2.740. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/17/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KELLAR HEARTT AMWARE
KELLER HEARTT
19801 HOLLAND RD
BROOK PARK OH 44142-1339 |
| 2.741. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/23/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KENNEBEC LUMBER
KENNEBEC LUMBER CO
2 MARIN WAY #2
STRATHAM NH 03885-2578 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.742. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KENNEY MFG CO
300 WAMPANOAG TRAIL
RIVERSIDE RI 02915-2200 |
| 2.743. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/04/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KENSEAL
A A I
P O BOX 87
ABSECON NJ 08201-0087 |
| 2.744. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KEOLIS
KEOLIS COMMUTER SVCS
P O BOX 9133
CHELSEA MA 02150-9133 |
| 2.745. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KEOLIS
P O BOX 9133
CHELSEA MA 02150-9133 |
| 2.746. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/18/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KEYSTONE DEDICATED - BLAN
K D L DBA QUICK FREI
P O BOX 752
CARNEGIE PA 15106-0752 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.747. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/18/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KEYSTONE DEDICATED - BLAN
KEYSTONED DEDICATED
P O BOX 752
CARNEGIE PA 15106-0752 |
| 2.748. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/18/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KEYSTONE DEDICATED - BLAN
Q F R
P O BOX 752
CARNEGIE PA 15106-0752 |
| 2.749. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/18/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KEYSTONE DEDICATED - BLAN
QUICK FREIGHT RATES
P O BOX 752
CARNEGIE PA 15106-0752 |
| 2.750. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/28/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KEYSTONE TECHNOLOGIES TBL
KEYSTONE TECHNOLOGIE
P O BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.751. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KIND
KIND OPERATIONS LLC
FEDEX SUPPLY CHAIN
1400 LOMBARDI AVE #2
GREEN BAY WI 54304-3922 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.752. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 06/19/18
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KING ARTHUR FLOUR ABORN CO
KING ARTHUR FLOUR
62 ACCORN PARK DR
NORWELL MA 02061-1645
- 2.753. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 02/03/17
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KING WIRE
P O BOX 2110
NEW YORK NY 10272-2110
- 2.754. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 09/27/17
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KLEER FAX INC
KLEER-FAX INC
640 PLAZA DRIVE #140
HIGHLANDS RANCH CO 80129-2508
- 2.755. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 06/25/15
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KOCH FILTER CORP
P O BOX 419259
KANSAS CITY MO 64141-6259
- 2.756. Title of contract CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 06/25/15
List the contract number of any government contract _____
State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KOKO S CONFECTIONARY
KOKO'S CONFECTIONARY
17 STENERSSEN LANE
COCKEYSVILLE MD 21030-2113

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.757. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KOLMAR LAB
KOLMAR LAB INC
30 HEMLOCK DRIVE
CONGERS NY 10920-1402 |
| 2.758. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CERTIFICATE OF LIABILITY INSURANCE
CERTIFICATE OF LIABILITY INSURANCE
INSURED
11/9/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KORE INSURANCE HOLDINGS, LLC
PO BOX 473
EISENHOWER PARKWAY, PLAZA 1
LIVINGSTON NJ 07039 |
| 2.759. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CERTIFICATE OF LIABILITY INSURANCE
CERTIFICATE OF LIABILITY INSURANCE
INSURED
7/15/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KORE INSURANCE HOLDINGS, LLC
PO BOX 473
EISENHOWER PARKWAY, PLAZA 1
LIVINGSTON NJ 07039 |
| 2.760. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CERTIFICATE OF LIABILITY INSURANCE
CERTIFICATE OF LIABILITY INSURANCE
INSURED
9/20/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KORE INSURANCE HOLDINGS, LLC
PO BOX 473
EISENHOWER PARKWAY, PLAZA 1
LIVINGSTON NJ 07039 |
| 2.761. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CERTIFICATE OF LIABILITY INSURANCE
CERTIFICATE OF LIABILITY INSURANCE
INSURED
VARIOUS SEE NOTES
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
KORE INSURANCE HOLDINGS, LLC
PO BOX 473
354 EISENHOWER PARKWAY,
PLAZA 1
LIVINGSTON NJ 07039 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.762. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER KOYO COPORATION
KOYO CORP OF USA
PO OBX 30382
CLEVELAND OH 44130-0382
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.763. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER KRATON POLYMERS
P O BOX 425
LOWELL AR 72745-0425
- State the term remaining** DATED: 01/16/18
- List the contract number of any government contract** _____
- 2.764. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER KURT S ADLER
PO BOX 3928/ACCT PAY
SPRINGFIELD MO 65808
- State the term remaining** DATED: 03/23/16
- List the contract number of any government contract** _____
- 2.765. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER KURTZ BROTHERS
P O BOX 392
CLEARFIELD PA 16830-0392
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.766. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER L D PLASTICS
P O BOX 11555
PLYMOUTH MA 02362
- State the term remaining** DATED: 09/21/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.767. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/04/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LAARS HEATING
LAARS HEATING SYS
M G N LOGISTICS
712 FERRY ST UNIT 1
EASTON PA 18042-4324 |
| 2.768. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/08/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LABEL TECH - TECH TRANSP
LABEL TECH
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.769. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/12/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LAMART CORP TRANS INSIGHT
LAMART CORPORATION
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.770. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/26/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LANDLINK E T BROWNE
E T BROWNE
P O BOX 1066
POINT PLEASANT NJ 08742-1066 |
| 2.771. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/19/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LANDSTAR UNILEVER
UNILEVER
LANDSTAR GLOBAL LOG
13410 SUTTON PARK DR
JACKSONVILLE FL 32224-5270 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.772. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/28/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LANGHAM DOW AGRO
DOW AGROSCIENCES
5335 W 74TH ST
INDIANAPOLIS IN 46268-4180 |
| 2.773. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/28/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LANGHAM DOW AGRO
SENTRICON
5335 W 74TH ST
INDIANAPOLIS IN 46268-4180 |
| 2.774. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/26/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LASSONDE PAPPAS TRANSPLACE
LASSONDE PAPPAS
P O BOX 425
LOWELL AR 72745-0425 |
| 2.775. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
LEASE OF REAL PROPERTY AT 9 WOLF ROAD (AKA 162 SICKER RD), LATHAM, NY
LESSEE
12/31/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LATHCO LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.776. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LATICRETE INTL
LATICRETE INTL INC
P O BOX 982262
EL PASO TX 79998-2262 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.777. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/10/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LEAKSMART
151 WEST JOHNSTOWN R
GAHANNA OH 43230-2700 |
| 2.778. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/11/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LEAKTITE
LEAKTITE CORP
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.779. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
NEMF CORPORATE CUSTOMER SERVICE 457 MAHONING DR, LEIGHTON, PA 18235-9701
LESSEE
12/31/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LEHCO, LP
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.780. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
ALLENTOWN TERMINAL # 68 REAL PROPERTY LEASE
LESSEE
MONTH TO MONTH
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LEHCO, LP
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.781. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/10/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
LEOLIGHT
LEOLIGHT INC
503 OAKDALE RD
NORTH YORK ON M3N1W7
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.782. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LES SAINT BLANKET
LES SAINT LOGISTICS
5100 POPLAR AVE 17TH
MEMPHIS TN 38137-4000
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.783. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LESLIE'S POOLMART
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60610
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.784. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LESLIE'S POOLMART
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60601
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____
- 2.785. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LESLIE'S POOLMART
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60601
- State the term remaining** DATED: 10/14/15
- List the contract number of any government contract** _____
- 2.786. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LESLIE'S POOLMART
ECHO GLOBAL LOGISTI
600 W CHICAGO #830
CHICAGO IL 60601
- State the term remaining** DATED: 10/14/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.787. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LEXINGTON MACHINING
P O BOX 30382
CLEVELAND OH 44130-0382
- State the term remaining** DATED: 02/03/17
- List the contract number of any government contract** _____
- 2.788. **Title of contract** UMBRELLA - EXCESS (2ND) **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 1000037020-07
- Nature of debtor's interest** INSURED LIBERTY INSURANCE
UNDERWRITERS
55 WATER STREET, 23RD FLOOR
NEW YORK NY 10041
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- 2.789. **Title of contract** EXCESS INSURANCE POLICY WITH POLICY NUMBER 1000037020-07 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED LIBERTY INSURANCE
UNDERWRITERS INC
CHRISTOPHER L PEIRCE
55 WATER ST., 23RD FLOOR
NEW YORK NY 10041
- State the term remaining** EFFECTIVE APRIL 10, 2018 EXPIRES APRIL 10, 2019
- List the contract number of any government contract** _____
- 2.790. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LIFTEX CORP
LIFTEX CORPORATION
P O BOX 9490
FALL RIVER MA 02720-0015
- State the term remaining** DATED: 10/03/16
- List the contract number of any government contract** _____
- 2.791. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LIGHTING SERVICES TARGET
FREIGHT
LIGHTING SERVICES
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 09/20/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.792. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | SOLID WASTE AND RECYCLING MANAGEMENT PROGRAM AGREEMENT

SERVICE CONTRACT

PRINCIPAL

EXPIRES OCT 1, 2021

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LINCOLN WASTE SOLUTIONS LLC
2075 SILAS DEANE HIGHWAY STE 101
ROCKY HILL CT 06067 |
| 2.793. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 06/25/15

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LINT TILE
SAMPCO
P O BOX 216
WENDEL PA 15691-0216 |
| 2.794. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 11/06/15

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LINT TILE
SAMPCO
P O BOX 216
WENDEL PA 15691-0216 |
| 2.795. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 11/14/16

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LIQUID FILLING COLUTIONS
LIQUID FILLING SOLUT
P O BOX 1644
DOYLESTOWN PA 18901-0257 |
| 2.796. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 12/12/18

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LIQUID FILLING COLUTIONS
LIQUID FILLING SOLUT
P O BOX 1644
DOYLESTOWN PA 18901-0257 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.797. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **LIQUID FILLING COLUTIONS**
- State the term remaining** DATED: 12/12/18 **LIQUID FILLING SOLUT**
- List the contract number of any government contract** _____ **P O BOX 1644**
DOYLESTOWN PA 18901-0257
- 2.798. **Title of contract** AUTO PD TRUCKS EXCESS **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. MACCD1602212
- Nature of debtor's interest** INSURED **LLOYD'S SYNDICATES**
- State the term remaining** 4/9/2019 **C/O LOCKTON COS LLP**
- List the contract number of any government contract** _____ **ATTN: CARGO & LOGISTICS**
THE ST. BOTOLPH BLDG
138 HOUNDSDITCH
LONDON EC3A 7AG
ENGLAND
- 2.799. **Title of contract** CERTIFICATE OF LIABILITY INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CERTIFICATE OF LIABILITY INSURANCE
- Nature of debtor's interest** INSURED **LOCKTON COMPANIES**
- State the term remaining** 4/10/2019 **1185 AVENUE OF THE AMERICAS**
- List the contract number of any government contract** _____ **SUITE 2010**
NEW YORK NY 10036
- 2.800. **Title of contract** CERTIFICATE OF INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CERTIFICATE OF INSURANCE
- Nature of debtor's interest** INSURED **LOCKTON COMPANIES**
- State the term remaining** 4/8/2019 **1185 AVENUE OF THE AMERICAS**
- List the contract number of any government contract** _____ **SUITE 2010**
NEW YORK NY 10036
- 2.801. **Title of contract** EVIDENCE OF COMMERCIAL PROPERTY INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY INSURANCE
- Nature of debtor's interest** INSURED **LOCKTON COMPANIES**
- State the term remaining** 8/31/2019 **1185 AVENUE OF THE AMERICAS**
- List the contract number of any government contract** _____ **SUITE 2010**
NEW YORK NY 10036

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.802. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CONTRACT OF INSURANCE WITH REF NO. B0713MACCD1802212

INSURANCE CONTRACT

INSURED

EFFECTIVE APRIL 9, 2018 EXPIRES APRIL 9, 2019

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOCKTON COMPANIES LLP
THE ST BOTOLPH BUILDING
138 HOUNDSDITCH
LONDON EC3A 7AG
UNITED KINGDOM |
| 2.803. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 05/31/16

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
LOROCO
2342 TECHNOLOGY DR #
O FALLON MO 63367 |
| 2.804. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 05/31/16

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
LOROCO
2342 TECHNOLOGY DR #
O FALLON MO 63367 |
| 2.805. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 11/28/16

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
BLUE ASH PAPER SALES
2342 TECHNOLOGY DR
O FALLON MO 63367 |
| 2.806. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 11/28/16

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
BLUE ASH PAPER SALES
2342 TECHNOLOGY DR
O FALLON MO 63367 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.807. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/28/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
CUSTOM DIE
2342 TECHNOLOGY DR
O FALLON MO 63367 |
| 2.808. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/28/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
CUSTOM DIE
2342 TECHNOLOGY DR
O FALLON MO 63367 |
| 2.809. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/28/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
GREENVILLE PAPER CON
2342 TECHNOLOGY DRIV
O FALLON MO 63367 |
| 2.810. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/28/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
GREENVILLE PAPER CON
2342 TECHNOLOGY DR
O FALLON MO 63367 |
| 2.811. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/28/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
ROYAL PAD PRODUCTS
2342 TECHNOLOGY DR
O FALLON MO 63367 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.812. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/28/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOROCO INDUSTRIES
ROYAL PAD PRODUCTS
2342 TECHNOLOGY DR
O FALLON MO 63367 |
| 2.813. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/13/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOTH RELOCATION
LOTH
3574 KEMPER RD
CINCINNATI OH 45241-2009 |
| 2.814. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/15/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOUIS GLUNZ BEER
LOUIS GLUNZ BEER INC
2262 LANDMEIER RD #2
ELK GROVE VILLAGE IL 60007-2644 |
| 2.815. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/06/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LOUIS GLUNZ BEER
COMPASS WINE & SPIRI
2262 LANDMEIER RD
ELK GROVE VILLAGE IL 60007-2644 |
| 2.816. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/20/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LUCKY CLOVER IL2000
LUCKY CLOVER PACKAGI
P O BOX 2545
VIRGINIA BEACH VA 23450-2545 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.817. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LUDLOW COMPOSITES
P O BOX 61050
FORT MYERS FL 33906-1050
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.818. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LUMINAIRE LED
800 HWY 71 SUITE 1
SEA GIRT NJ 08750-2800
- State the term remaining** DATED: 08/17/16
- List the contract number of any government contract** _____
- 2.819. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LUMINANCE
AMER DE ROSA LAMPART
1945 S TUBEWAY AVE
COMMERCE CA 90040-1611
- State the term remaining** DATED: 02/20/18
- List the contract number of any government contract** _____
- 2.820. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LUMINANCE
CONCORD LIGHTING
1945 S TUBEWAY AVE
COMMERCE CA 90040-1611
- State the term remaining** DATED: 02/20/18
- List the contract number of any government contract** _____
- 2.821. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER LUMINANCE
HALLMARK COLLECTIVES
1945 S TUBEWAY AVE
COMMERCE CA 90040-1611
- State the term remaining** DATED: 02/20/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.822. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/20/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LUMINANCE
MARCO LIGHTING
1945 S TUBEWAY AVE
COMMERCE CA 90040-1611 |
| 2.823. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/26/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LUNA ROSSA BAKE SHOP
LUNA ROSSA BAK SHOP
30 VILLAGE COURT
HAZLET NJ 07730-1533 |
| 2.824. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/14/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LUPIN PHARMACEUTICALS UPS
LUPIN PHARMACEUTICAL
1335 NORTHMEADOW PKW
ROSWELL GA 30076-4949 |
| 2.825. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

M & L TRUCKING SERVC
REVERE COPPER PRODS
P O BOX 521
ROME NY 13441 |
| 2.826. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/30/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

M I Q GLOBAL
P O BOX 11250
OVERLAND PARK KS 66207-1250 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.827. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **M T S SEATING**
- State the term remaining** DATED: 06/25/15 **151 JOHN JAMES AUDUB**
- List the contract number of any government contract** _____ **AMHERST NY 14228-1111**
- 2.828. **Title of contract** CERTIFICATE OF LIABILITY INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CERTIFICATE OF LIABILITY INSURANCE
- Nature of debtor's interest** INSURED **M.J. FISH, LLC**
- State the term remaining** 4/28/2019 **302 WEST MAIN ST. SUITE 155**
- List the contract number of any government contract** _____ **AVON CT 06001**
- 2.829. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **MABE**
- State the term remaining** DATED: 06/25/15 **689 SOUTH SERVICE RD**
- List the contract number of any government contract** _____ **GRIMSBY ON L3M4E8**
- _____** **CANADA**
- 2.830. **Title of contract** MACHINISTS MONEY PURCHASE PENSION PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** MONEY PURCHASE PENSION PLAN
- Nature of debtor's interest** EMPLOYER **MACHINISTS MONEY PURCHASE**
- State the term remaining** DATED: JUNE 2018 **PENSION PLAN**
- List the contract number of any government contract** _____ **140 SYLVAN AVENUE**
- _____** **SUITE 303**
- _____** **ENGLEWOOD CLIFFS NJ 07632**
- 2.831. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **MACK FINANCIAL SERVICES**
- State the term remaining** 03/13/2020 **7025 ALBERT PICK ROAD, SUITE**
- List the contract number of any government contract** _____ **105**
- _____** **PO BOX 26131**
- _____** **GREENSBORO NC 27402-6131**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.832. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER MACK FINANCIAL SERVICES
VFS US LLC
7025 ALBERT PICK RD, SUITE 105
P.O. BOX 26131
GREENSBORO NC 27402-6131
- State the term remaining** DATED: 10/08/2013 MATURITY DATE: 10/08/2020
- List the contract number of any government contract** _____
- 2.833. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER MACK FINANCIAL SERVICES
VFS US LLC
7025 ALBERT PICK RD, SUITE 105
P.O. BOX 26131
GREENSBORO NC 27402-6131
- State the term remaining** DATED: 03/21/2013 MATURITY DATE: 03/13/2020
- List the contract number of any government contract** _____
- 2.834. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER MACNEIL AUTOMOTIVE
600 W CHICAGO AVE
CHICAGO IL 60610
- State the term remaining** DATED: 12/29/15
- List the contract number of any government contract** _____
- 2.835. **Title of contract** WORKERS COMPENSATION **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 1810023953
- Nature of debtor's interest** INSURED MAINE EMPLOYERS' MUTUAL INS.
PO BOX 11409
PORTLAND ME 04104
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.836. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER MAJILITE
MAJILITE CORP
216 CENTERVIEW DR #3
BRENTWOOD TN 37024
- State the term remaining** DATED: 07/13/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.837. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/02/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANCINI PACKAGING
MANCINI PACKING
6209 MID RIVER MALL
SAINT CHARLES MO 63304-1102 |
| 2.838. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
SIGNED: 02/09/1996
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN JET TRANSPORT
YVONNE BAILEY
PO BOX 390
GORE BAY ON POP1H02190
CANADA |
| 2.839. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
SIGNED: 02/12/1996
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN JET TRANSPORT
YVONNE BAILEY
PO BOX 390
GORE BAY ON POP1H02190
CANADA |
| 2.840. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | UPDATE LETTER
UPDATE TO DIVISION OF REVENUE
CONTRACTOR - INTERCHANGE AGMT
DATED: 06/20/1997
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN TRANSPORT
SYLIVA KNIGHT
US OPERATIONS MANAGER
1175 MEYERSIDE DRIVE
#1-3
MISSISSAUGA ON L5T 1H3
CANADA |
| 2.841. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
SIGNED: 10/08/1997
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN TRANSPORT
SYLIVA KNIGHT
US OPERATIONS MANAGER
1175 MEYERSIDE DRIVE
#1-3
MISSISSAUGA ON 0NL5T1H3
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.842. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
SIGNED: 10/31/1997
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN TRANSPORT
SYLIVA KNIGHT
US OPERATIONS MANAGER
1175 MEYERSIDE DRIVE
#1-3
MISSISSAUGA ON ONL5T1H3
CANADA |
| 2.843. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
SERVICE CARRIER CONTRACT
CO-CONTRACTOR
CAN BE TERMINATED WITH 10 DAYS WRITTEN NOTICE
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN TRANSPORT INC
154 HIGHWAY 540 B
GORE BAY ON P0P 1H0
CANADA |
| 2.844. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
SERVICE CARRIER CONTRACT
CO-CONTRACTOR
CAN BE TERMINATED WITH 10 DAYS WRITTEN NOTICE
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN TRANSPORT INC
154 HIGHWAY 540 B
GORE BAY ON P0P 1H0
CANADA |
| 2.845. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
SERVICE CARRIER CONTRACT
CO-CONTRACTOR
EFFECTIVE AUG 7, 2009 AND RENEWED AUTOMATICALLY ON YEARLY BASIS
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN TRANSPORT INC
VP FINANCE
154 HIGHWAY 540 B
GORE BAY ON P0P 1H0
CANADA |
| 2.846. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
SERVICE CARRIER CONTRACT
CO-CONTRACTOR
EFFECTIVE AUG 7, 2009 AND RENEWED AUTOMATICALLY ON YEARLY BASIS
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MANITOULIN TRANSPORT INC
VP FINANCE
154 HIGHWAY 540 B
GORE BAY ON P0P 1H0
CANADA |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.847. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/04/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MAPLE CITY RUBBER
COMPASS HEALTH
2846 S FALKENBURG RD
RIVERVIEW FL 33578-2563 |
| 2.848. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/27/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MAPLE PRIME LLC
860 BEDFORD AVE
BROOKLYN NY 11205-2859 |
| 2.849. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/09/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MASONITE
384 INVERNESS PKWY #
ENGLEWOOD CO 80112-5821 |
| 2.850. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MATS
MATS INC
PO BOX 5060
FALL RIVER MA 02723-0404 |
| 2.851. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MAXELL
30 HEMLOCK DR
CONGERS NY 10920-1402 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.852. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MAXELL
30 HEMLOCK DR
CONGERS NY 10920-1402 |
| 2.853. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/14/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MAXONE
MAXZONE
P O BOX 578
CRYSTAL LAKE IL 60039-0578 |
| 2.854. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/17/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MAYWOOD FRUNITURE TBL
MAYWOOD FURNITURE
P O BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.855. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/30/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MCCUE CORP ADCCO
MCCUE CORPORATION
152 LYNNWAY #2-D
LYNN MA 01902-3420 |
| 2.856. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/06/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MEDIKMARK
STRAGIS HEALTHCARE
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.857. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/30/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MEDIKMARK
MEDIKMARK INC
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507 |
| 2.858. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/30/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MEDORA SNACKS
13990 FIR STREET
OREGON CITY OR 97045-8906 |
| 2.859. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MENTHOLATUM CO
P O BOX 100
RANSOMVILLE NY 14131-0100 |
| 2.860. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
01/20/2025
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.861. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
01/21/2024
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.862. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
02/09/2024
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.863. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
02/09/2024
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.864. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
04/27/2023
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.865. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
05/01/2022
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.866. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
05/15/2024
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.867. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
05/21/2022
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.868. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
07/15/2022
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.869. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
09/14/2023
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.870. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
10/20/2025
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |
| 2.871. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | NOTE AND SECURITY AGREEMENT (MULTI-STATE)
LEASE AGREEMENT
BORROWER
12/08/2023
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
MERCEDES-BENZ FINANCIAL SERVICES USA LLC
13650 HERITAGE PARKWAY
FORT WORTH TX 76177 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.872. **Title of contract** LEASE AGREEENT
- State what the contract or lease is for** ROCHESTER TERMINAL # 51 REAL PROPERTY LEASE - 50 LUISE STREET, ROCHESTER, NY 14606
- Nature of debtor's interest** LESSEE
- State the term remaining** 6/30/2010
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- MERCOHEN CORP
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.873. **Title of contract** LEASE AGREEENT
- State what the contract or lease is for** MERIDEN TERMINAL # 16 REAL PROPERTY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 12/31/2026
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- MERI PROPERTIES LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.874. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 03/27/18
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- METTLER TOLERDO LLC
METTLER - TOLEDO LLC
5100 POPLAR AVE 15TH
MEMPHIS TN 38137-5015
- 2.875. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 01/13/17
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- MEVOTECH LP
151 JOHN JAMES AUDUB
AMHERST NY 14228-1111
- 2.876. **Title of contract** SECOND AMENDMENT TO LEASE OF 1919 AND 2001 PLANTATION RD, ROANOKE, VA
- State what the contract or lease is for** ROANOKE TERMINAL # 44 REAL PROPERTY LEASE - 1919 PLANTATION ROAD NE, ROANOKE, VA 24012
- Nature of debtor's interest** LESSEE
- State the term remaining** 12/31/2020
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- MG ROANOKE/PLANTATION LLC
JOHN L. CROWLEY
5607 GROVE AVENUE
RICHMOND VA 23226

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.877. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/06/19
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MICHAEL HALEBIAN
MICHAEL HALEBIAN & C
30 VILLAGE COURT
HAZLET NJ 07730-1533 |
| 2.878. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/13/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MIDLAND POWER
376 MAGNETIC DRIVE
TORONTO ON M3M0A9
CANADA |
| 2.879. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/03/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MIDWEST AIR TECHNOLOGIES
MIDWEST AIR TECH
741 WAGON STE #3
NEW LENOX IL 60451-1357 |
| 2.880. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MIDWEST MOTOR EXPRESS, INC.
KRISTIN JANGULA
PO BOX 1058
BISMARCK ND 58502-1058 |
| 2.881. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MIDWEST MOTOR EXPRESS, INC.
KRISTIN JANGULA
PO BOX 1058
BISMARCK ND 58502-1058 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.882. **Title of contract** INTERLINE DIVISION AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TRAILER INTERCHANGE AGREEMENT
- Nature of debtor's interest** CONTRACTOR - INTERCHANGE AGMT **MIDWEST MOTOR EXPRESS, INC.**
- State the term remaining** _____ **KRISTIN JANGULA**
- List the contract number of any government contract** _____ **PO BOX 1058**
BISMARCK ND 58502-1058
- 2.883. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **MILBANK**
- State the term remaining** DATED: 07/16/16 **MILBANK MFG CO**
- List the contract number of any government contract** _____ **P O BOX 11250**
OVERLAND PARK KS 66207-1250
- 2.884. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **MILTON CAT**
- State the term remaining** DATED: 04/14/16 **P O BOX 1010**
NASHUA NH 03061-1010
- List the contract number of any government contract** _____
- 2.885. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WILLIAMSPORT TERMINAL # 62 REAL PROPERTY LEASE - 110 SODOM ROAD, MILTON, PA 17847
- Nature of debtor's interest** LESSEE **MILTON PROPERTIES LP**
- State the term remaining** 12/31/2018 **C/O AMZ MANAGEMENT LLC**
- List the contract number of any government contract** _____ **1-71 NORTH AVENUE EAST**
ELIZABETH NJ 07201
- 2.886. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **MITSUBISHI MOTOR**
- State the term remaining** DATED: 11/22/16 **MITSUBISHI MOTOR NOR**
- List the contract number of any government contract** _____ **405 E 78TH STREET**
BLOOMINGTON MN 55420-1251

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.887. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/07/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MKT METAL MFG
305 SOUTH MAPLE AVE
GREENSBURG PA 15601-3218 |
| 2.888. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MOD PAC CORP
MOD PAC CORPORATION
P O BOX 100
RANSOMVILLE NY 14131-0100 |
| 2.889. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/28/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MOHAWK RUBBER
MOHAWK RUBBER INC
130 NEW BOSTON ST
WOBURN MA 01801-6275 |
| 2.890. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/13/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MONSTER ENERGY
4115 GUARDIAN ST #D
SIMI VALLEY CA 93063-3382 |
| 2.891. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MOOG CONTROLS IND DV
MOOG INC
P O BOX 100
RANSOMVILLE NY 14131-0100 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.892. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MOUNTAIN LAUREL SPIR
114-668 STONY HILL R
YARDLEY PA 19067 |
| 2.893. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/17/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MULITCELL NORTH
MULTICELL NORTH
1000 WINDHAM PARKWAY
BOLINGBROOK IL 60490-3507 |
| 2.894. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/17/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MULITCELL NORTH
MULTICELL PACKAGING
P O BOX 932721
CLEVELAND OH 44193-0015 |
| 2.895. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/17/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

NALCO CO
P O BOX 19749 DEPT 4
CHARLOTTE NC 28219-9749 |
| 2.896. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
ALBANY TERMINAL # 56 REAL PROPERTY LEASE - 4315
ALBANY STREET, COLONIE, NY 12205
LESSEE
12/31/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

NANCY SB CORP.
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.897. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER NATCO HOME GROUP
P O BOX 9133
CHELSEA MA 02150-9133
- State the term remaining** DATED: 10/24/16
- List the contract number of any government contract** _____
- 2.898. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER NATIONAL CONTAINER
N C G
CHRLTL
1840 N MARCEY STREE
CHICAGO IL 60614-4820
- State the term remaining** DATED: 02/06/16
- List the contract number of any government contract** _____
- 2.899. **Title of contract** TRUCKER LIABILITY - EXCESS **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 42RLO30354302
- Nature of debtor's interest** INSURED NATIONAL FIRE & MARINE
INSURANCE
1314 DOUGLAS STREET, SUITE
1400
OMAHA NE 68102-1944
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- 2.900. **Title of contract** COMMERCIAL RETAINED LIMI LIABILITY WITH POLICY NO. 42- RLO- 303543- 02 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED NATIONAL FIRE & MARINE
INSURANCE COMPANY
1314 DOUGLAS ST.,STE 1400
OMAHA NE 68102-1944
- State the term remaining** EFFECTIVE APRIL 10, 2018 EXPIRES APRIL 10, 2019
- List the contract number of any government contract** _____
- 2.901. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER NATIONAL FREIGHT SERVICES
ABALINE
34 FRANKLIN AVE #315
BROOKLYN NY 11205-1223
- State the term remaining** DATED: 08/11/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

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|--------|---|---|--|
| 2.902. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/11/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

NATIONAL FREIGHT SERVICES
AMERIDERM
145 ROSS ST
BROOKLYN NY 11211-7718 |
| 2.903. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/11/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

NATIONAL FREIGHT SERVICES
PIONEER
34 FRANKLIN AVE #315
BROOKLYN NY 11205-1223 |
| 2.904. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/11/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

NATIONAL FREIGHT SERVICES
SHIELDLINE
34 FRANKLIN AVE #315
BROOKLYN NY 11205-1223 |
| 2.905. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | UMBRELLA - EXCESS (5TH)
POLICY NO. SHX00049055965
INSURED
4/10/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

NATIONAL SURETY CORP
225 W WASHINGTON ST
STE 1800
CHICAGO IL 60606 |
| 2.906. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | D&O/EPL/FID
POLICY NO. 28804753
INSURED
11/20/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

NATIONAL UNION FIRE INS CO OF
PITTSBURG, PA
175 WATER ST
NEW YORK NY 10038-4969 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.907. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | AGREEMENT WITH POLICY NO. 02-778-08-87
INSURANCE CONTRACT
INSURED
EFFECTIVE NOV 20, 2018 EXPIRES NOV 20, 2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NATIONAL UNION FIRE INSURANCE COMPANY
175 WATER STREET
NEW YORK NY 10038-4969 |
| 2.908. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NATL NAIL CORP
360 W BUTTERFIELD RD
ELMHURST IL 60126-5068 |
| 2.909. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/17/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NATL PUBLIC SEATING
372 E KENNEDY BLVD
LAKEWOOD NJ 08701-1434 |
| 2.910. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/04/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NEON ENGINEERING
10558 TACONIC TERRAC
CINCINNATI OH 45215-1125 |
| 2.911. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/23/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NER MITSVAH INC
145 ROSS ST
BROOKLYN NY 11211-7718 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

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|--------|---|--|--|
| 2.912. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/19
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NEW ENGLAND COFFEE
400 POYDRAS ST 10TH
NEW ORLEANS LA 70130-3245 |
| 2.913. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NEW HAMPSHIRE BALL
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.914. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NEW HAMPSHIRE BALL
N H B B
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.915. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | WORKERS COMPENSATION
POLICY NO. WC-NJ W21713-3-18
INSURED
12/31/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NEW JERSEY MANUFACTURERS
INS.
301 SULLIVAN WAY
WEST TRENTON NJ 08628 |
| 2.916. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/22/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NICHOLS PORTLAND CTL
NICHOLS PORTLAND
P O BOX 1010
NASHUA NH 03061-1010 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.917. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER NIPPON EXPRESS
NY OCEAN CARGO
#201
SECAUCUS NJ 07094-2302
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.918. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER NISSIN FOODS CO YUSEN
LOGISTICS
NISSIN FOODS
P O BOX 3477
CORDOVA TN 38088-3477
- State the term remaining** DATED: 11/13/18
- List the contract number of any government contract** _____
- 2.919. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER NITTO DENKO AMER
NITTO DENKO AMERICA
P O BOX 270509
SAINT LOUIS MO 63127-0509
- State the term remaining** DATED: 06/14/18
- List the contract number of any government contract** _____
- 2.920. **Title of contract** CERTIFICATE OF WORKERS COMPENSATION INSURANCE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WORKERS COMPENSATION INSURANCE
- Nature of debtor's interest** INSURED NJM INSURANCE GROUP
301 SULLIVAN WAY
WEST TRENTON NJ 08628
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.921. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** JOLIET TERMINAL # 39 REAL PROPERTY LEASE
- Nature of debtor's interest** LESSEE NORTH AMERICAN TERMINALS
23348 W EAMES
CHANNAHON IL 60410
- State the term remaining** 8/14/2023
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.922. **Title of contract** LEASE AGREEENT
- State what the contract or lease is for** ELIZABETH TERMINAL # 01 REAL PROPERTY LEASE -1-71 NORTH AVENUE EAST, ELIZABETH, NJ 07201-2958
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/31/2024
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- NORTH AVENUE EAST LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.923. **Title of contract** LEASE AGREEMENT
- State what the contract or lease is for** BOSTON TERMINAL # 03 REAL PROPERTY LEASE - 90 CONCORD ST., NORTH READING, MA 01864-2607
- Nature of debtor's interest** LESSEE
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- NORTH RED TRUCK CORP.
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.924. **Title of contract** LETTER OF EXTENSION
- State what the contract or lease is for** REAL PROPERTY LEASE - RD #1 (PARCEL 00-008-024A), TOWNSHIP OF DELAWARE, WATSONTOWN, PA 17777
- Nature of debtor's interest** LESSEE
- State the term remaining** EXPIRATION 1/31/2017
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- NORTH TURBO CORPORATION
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.925. **Title of contract** LEASE AGREEENT
- State what the contract or lease is for** ELKTON TERMINAL # 43 REAL PROPERTY LEASE- 3 CENTER DRIVE, NORTHEAST, MD 21901-2406
- Nature of debtor's interest** LESSEE
- State the term remaining** 10/31/2027
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- NORTHEAST COMMERCE CENTER LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- 2.926. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 11/08/17
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- NORTHERN AIR SYSTEMS
P O BOX 3065
SYRACUSE NY 13220-3065

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|--|
| 2.927. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/06/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
NYCO
NYCO PRODUCTS CO
FREEDOM LOGISTICS
360 W BUTTERFIELD RD
ELMHURST IL 60126-5041 |
| 2.928. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 08/30/1999
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OAK HARBOR FREIGHT LINES, INC.
TERI RAMSDELL/J MC CRACKEN
PO BOX 1469
AUBURN WA 98071-1469 |
| 2.929. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 08/30/1999
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OAK HARBOR FREIGHT LINES, INC.
TERI RAMSDELL/J MC CRACKEN
PO BOX 1469
AUBURN WA 98071-1469 |
| 2.930. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 08/30/1999
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OAK HARBOR FREIGHT LINES, INC.
TERI RAMSDELL/J MC CRACKEN
PO BOX 1469
AUBURN WA 98071-1469 |
| 2.931. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 08/30/1999
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OAK HARBOR FREIGHT LINES, INC.
TERI RAMSDELL/J MC CRACKEN
PO BOX 1469
AUBURN WA 98071-1469 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.932. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 09/06/2006
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OAK HARBOR FREIGHT LINES, INC.
TERI RAMSDELL/J MC CRACKEN
PO BOX 1469
AUBURN WA 98071-1469 |
| 2.933. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE DIVISION AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 11/08/2004
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OAK HARBOR FREIGHT LINES, INC.
TERI RAMSDELL/J MC CRACKEN
PO BOX 1469
AUBURN WA 98071-1469 |
| 2.934. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/29/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ODW LOG - WIN WHOLESALE
WINSUPPLY
345 HIGH ST #600
HAMILTON OH 45011-6071 |
| 2.935. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/29/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ODW LOG - WIN WHOLESALE
WINWHOLESALE
345 HIGH ST #600
HAMILTON OH 45011-6071 |
| 2.936. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/07/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ODYSSEY LANXESS
ARLANXEO USA LLC
P O BOX 441326
KENNESAW GA 30160-9527 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|---|---|
| 2.937. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/09/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ODYSSEY LANXESS
INTL DIOXCIDE INC
P O BOX 441326
KENNESAW GA 30160-9527 |
| 2.938. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/19/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ODYSSEY LANXESS
LANXESS CORP
P O BOX 441326
KENNESAW GA 30160-9527 |
| 2.939. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/06/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OFFICE DEPOT HARTE HANKS
OFFICE DEPOT
P O BOX 700367
DALLAS TX 75370-0367 |
| 2.940. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/01/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OHIO FEATHER CO
OHIO FEATHER COMPANY
1 KOVACH DR
CINCINNATI OH 45215-1000 |
| 2.941. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
BETHPAGE TERMINAL # 14 REAL PROPERTY LEASE - 1
IMPERATORE DRIE, BETHPAGE, NY 11804
LESSEE
12/31/2019
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OLD BETH LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.942. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

OLD DOMINION BRUSH
P O BOX 1162
HICKORY NC 28603-1162 |
| 2.943. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/06/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

OLYMPIA SPORTS
OLYMPIA SPORT
P O BOX 1010
NASHUA NH 03061-1010 |
| 2.944. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/28/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

OLYMPIA SPORTS
OLYMPIA SPORTS CENTE
PO BOX 1010
NASHUA NH 03061-1010 |
| 2.945. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/28/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

OLYMPIA SPORTS
PO BOX 1010
NASHUA NH 03061-1010 |
| 2.946. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

OMEGA PRECISION
127 W RENAISSANCE BL
FARMINGDALE NJ 07727-4335 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.947. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ONEIDA MOLDED PLASTICS KDL
ONEIDA MOLDED PLASTI
P O BOX 752
CARNEGIE PA 15106-0752
- State the term remaining** DATED: 10/22/18
- List the contract number of any government contract** _____
- 2.948. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ONTARIO KNIFE
ONTARIO KNIFE CO
P O BOX 100
RANSOMVILLE NY 14131-0100
- State the term remaining** DATED: 03/09/18
- List the contract number of any government contract** _____
- 2.949. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** NEWBURGH TERMINAL # 52 REAL PROPERTY LEASE - 50
LOUISE ST, ROCHESTER, NY 14606
- Nature of debtor's interest** LESSEE ORANGE TRUCK CORP
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 6/30/2010
- List the contract number of any government contract** _____
- 2.950. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ORIGINAL FOOTWEAR CHRLTL
ORIGINAL FOOTWEAR
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051
- State the term remaining** DATED: 01/07/19
- List the contract number of any government contract** _____
- 2.951. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ORVIS
872 LEE HIGHWAY
ROANOKE VA 24019-8516
- State the term remaining** DATED: 03/03/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.952. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/05/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OSHKOSH CORP CASS
OSHKOSH CORPORATION
P O BOX 17632
SAINT LOUIS MO 63178-7632 |
| 2.953. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/28/19
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OUR PETS
OUR PET'S
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507 |
| 2.954. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/15/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OXFORD INST
BRUKER-OST LLC
P O BOX 910
CAPE MAY COURT HOUSE NJ
08210-0910 |
| 2.955. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/15/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
OXFORD INST
BRUKER-OST LLC
P O BOX 910
CAPE MAY COURT HOUSE NJ
08210-0910 |
| 2.956. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/30/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
P D I PLASTICS BLUEGRACE
P D I PLASTICS
2846 S FALKENBURG RD
RIVERVIEW FL 33578-2563 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|--|
| 2.957. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/30/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
P D I PLASTICS BLUEGRACE
SANECK INTL
2846 S FAULKENBURG R
RIVERVIEW FL 33578-2563 |
| 2.958. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
P L S LOGISTICS SERV
P L S LOGISTICS SVCS
3120 UNIONVILLE RD
CRANBERRY TWP PA 16066-3437 |
| 2.959. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
P L S LOGISTICS SERV
P L S LOGISTICS SVCS
3120 UNIONVILLE RD
CRANBERRY TWP PA 16066-3437 |
| 2.960. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
EFFECTIVE DATE: 01/01/2011
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PACIFIC ALASKA FREIGHTWAYS, INC
2812-70TH AVE E
FIFE WA 98424 |
| 2.961. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERLINE AGREEMENT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
EFFECTIVE DATE: 01/01/2011
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PACIFIC ALASKA FREIGHTWAYS, INC
2812-70TH AVE E
FIFE WA 98424 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.962. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

PACKAGING GRAPHICS
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.963. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/26/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

PACKAGING WHOLESALERS
MIHLFELD ASSOC
PACKAGING WHOLESALER
P O BOX 3928
SPRINGFIELD MO 65808-3928 |
| 2.964. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/26/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

PACKAGING WHOLESALERS
MIHLFELD ASSOC
PACKAGING WHOLESALER
P O BOX 3928
SPRINGFIELD MO 65808-3928 |
| 2.965. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/31/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

PACTIV
MOBIL CHEMICAL CO
P O BOX 61050
FORT MYERS FL 33908 |
| 2.966. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/07/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

PALEEWONG TRADING
C D S LOGISTICS
1273 BOUND BROOK RD
MIDDLESEX NJ 08846-1490 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.967. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/09/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PALEEWONG TRADING
ARROWPAC
1273 BOUND BROOK RD
MIDDLESEX NJ 08846-1490 |
| 2.968. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/09/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PALEEWONG TRADING
C D S
1273 BOUND BROOK RD,
MIDDLESEX NJ 08846-1490 |
| 2.969. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PALEEWONG TRADING
1273 BOUND BROOK RD
MIDDLESEX NJ 08846-1490 |
| 2.970. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PALEEWONG TRADING
BROOK WAREHOUSE
1273 BOUND BROOK RD
MIDDLESEX NJ 08846-1490 |
| 2.971. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PALEEWONG TRADING
U S A CONTAINER
1273 BOUND BROOK RD
MIDDLESEX NJ 08846-1490 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

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|--------|---|--|--|
| 2.972. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/05/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PALEEWONG TRADING
TROY CHEMICAL
1273 BOUND BROOK RD
MIDDLESEX NJ 08846-1490 |
| 2.973. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/15/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PALEEWONG TRADING
WORLD WIDE WAREHOUSE
1273 BOUND BROOK RD
MIDDLESEX NJ 08846-1490 |
| 2.974. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/10/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PASCO FOODS KATA LOGISTICS
PASCO FOODS
P O BOX 342525
AUSTIN TX 78734-0043 |
| 2.975. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/16/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PASCO INC
P O BOX 1747
LYNWOOD CA 90262-1247 |
| 2.976. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PAT-TRAP
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.977. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CHARLESTON TERMINAL # 04 REAL PROPERTY LEASE - 500 RIVER EAST DRIVE, BELLE, WV 25015
- Nature of debtor's interest** LESSEE PCG, INC.
C/O PAT GRANCEY
PRESIDENT-FOUNDER
412 TENNESSEE AVENUE
CHARLESTON WV 25302
- State the term remaining** 4/14/2021
- List the contract number of any government contract** _____
- 2.978. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PENNY PLATE CO ADCCO
PENNY PLATE LLC
152 LYNNWAY #2-D
LYNN MA 01902-3420
- State the term remaining** DATED: 12/28/18
- List the contract number of any government contract** _____
- 2.979. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PERFECT TURF
1213 REMINGTON BLVD
ROMEOLVILLE IL 60446-6504
- State the term remaining** DATED: 07/19/18
- List the contract number of any government contract** _____
- 2.980. **Title of contract** ADDENDUM TO THE TRANSPORTATION AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TRAILER INTERCHANGE AGREEMENT
- Nature of debtor's interest** CONTRACTOR - INTERCHANGE AGMT PERFORMANCE FREIGHT
JANINE OLSON
2040 W OKLAHOMA AVE
MILWAUKEE WI 53215-4444
- State the term remaining** DATED: 09/24/2001
- List the contract number of any government contract** _____
- 2.981. **Title of contract** INTERCHANGE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TRAILER INTERCHANGE AGREEMENT
- Nature of debtor's interest** CONTRACTOR - INTERCHANGE AGMT PERFORMANCE FREIGHT
SYSTEMS, SERVICES, INC.
JANINE OLSON
2040 W OKLAHOMA AVE
MILWAUKEE WI 53215-4444
- State the term remaining** DATED: 08/23/1996
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.982. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PERKIN ELMER CORP
P O BOX 9202
OLD BETHPAGE NY 11804-9002
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.983. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE - 34 PERRY ROAD, BANGOR, ME 04401
- Nature of debtor's interest** LESSEE PERRY ROAD LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2018
- List the contract number of any government contract** _____
- 2.984. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PET SUPPLIES PLUS
P S P
TRANSPLACE
P O BOX 425
LOWELL AR 72745-0425
- State the term remaining** DATED: 03/19/18
- List the contract number of any government contract** _____
- 2.985. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PET SUPPLIES PLUS
P S P DISTRIBUTION
TRANSPLACE
P O BOX 425
LOWELL AR 72745-0425
- State the term remaining** DATED: 08/09/16
- List the contract number of any government contract** _____
- 2.986. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PET SUPPLIES PLUS
TRANSPLACE
P O BOX 425
LOWELL AR 72745-0425
- State the term remaining** DATED: 09/30/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|--------|---|--|---|
| 2.987. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/25/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PFANNENBERG
PFANNENBERG INC
P O BOX 888470
GRAND RAPIDS MI 49588-8470 |
| 2.988. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/20/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PHILLIPS FEED PET SUPPLY
PHILLIPS FEED & PET
P O BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.989. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PHOENIX ROPE
1213 REMINGTON BLVD
ROMEOVILLE IL 60446-6504 |
| 2.990. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/24/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PINNACLE FOODS SIMPLIFIED
PINNACLE FOOD GROUP
P O BOX 40088
BAY VILLAGE OH 44140-0088 |
| 2.991. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/24/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PINNACLE FOODS SIMPLIFIED
PINNACLE FOODS
P O BOX 40088
BAY VILLAGE OH 44140-0088 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.992. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PIONEER BOX CO
VERITIV
980 MAIN ST #3
WALTHAM MA 02451-7404
- State the term remaining** DATED: 02/04/19
- List the contract number of any government contract** _____
- 2.993. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PIONEER BOX CO
980 MAIN ST #3
WALTHAM MA 02451-7404
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.994. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PIONEER PACKAGING
1213 REMINGTON BLVD
ROMEONVILLE IL 60446-6504
- State the term remaining** DATED: 09/12/18
- List the contract number of any government contract** _____
- 2.995. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PIPING ROCK
30 HEMLOCK DRIVE
CONGERS NY 10920-1402
- State the term remaining** DATED: 09/17/18
- List the contract number of any government contract** _____
- 2.996. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PIRELLI TIRES
P O BOX 608
MOUNT VERNON IN 47620-0608
- State the term remaining** DATED: 12/30/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|--|
| 2.997. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/27/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PITCO FRIALATOR
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.998. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/27/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PITCO FRIALATOR
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.999. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/12/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PITCO FRIALATOR
PITCO
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.1000. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | INTERCHANGE AGREEMENT
SERVICE CONTRACT
CARRIER
EFFECTIVE 4/16/2003
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PJAX INCORPORATED
P O BOX 1290
GIBSONIA PA 15044 |
| 2.1001. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | TRANSPORTATION SERVICE AGREEMENT
SERVICE CONTRACT
CARRIER
EFFECTIVE 9/1/2005 UNTIL 8/31/2006
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PJAX INCORPORATED
SCOTT COOPER, TRAFFIC MGR
P O BOX 1290
GIBSONIA PA 15044 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|---|--|
| 2.1002. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | TRANSPORTATION SERVICE AGREEMENT
SERVICE CONTRACT
CARRIER
EFFECTIVE 9/19/2005 UNTIL 9/18/2006
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PJAX INCORPORATED
SCOTT COOPER, TRAFFIC MGR
P O BOX 1290
GIBSONIA PA 15044 |
| 2.1003. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/23/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PLEASANTMOUNT WELDING
PLEASANT MOUNT WELDI
A F S
P O BOX 18170
SHREVEPORT LA 71138-1170 |
| 2.1004. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PLEASANTMOUNT WELDING
PLEASANT MOUNT WELDI
A F S
P O BOX 18170
SHREVEPORT LA 71138-1170 |
| 2.1005. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PLEASANTMOUNT WELDING
PLEASANT MOUNT WELDI
AFS LOGISTICS
P O BOX 18170
SHREVEPORT LA 71138-1170 |
| 2.1006. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/16/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PLEATCO TRANS INSIGHT
PLEATCO
P O BOX 23000
HICKORY NC 28603-0230 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1007. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **PLUG POWER**
- State the term remaining** DATED: 08/03/18 **P O BOX 100**
- List the contract number of any government contract** _____ **RANSOMVILLE NY 14131-0100**
- 2.1008. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **POLAR PAK**
- State the term remaining** DATED: 02/13/18 **60 EMILIEN-MARCOUX**
- List the contract number of any government contract** _____ **BLAINVILLE QC J7C0B5**
- 2.1009. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **POLYOK - DRT**
- State the term remaining** DATED: 11/13/15 **POLYLOK**
- List the contract number of any government contract** _____ **850 HELEN DRIVE**
- LEBANON PA 17042**
- 2.1010. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **POLYOK - DRT**
- State the term remaining** DATED: 11/13/15 **POLYLOK**
- List the contract number of any government contract** _____ **850 HELEN DR**
- LEBANON PA 17042**
- 2.1011. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **POMPEIAN**
- State the term remaining** DATED: 06/25/15 **POMPEIAN INC**
- List the contract number of any government contract** _____ **10380 N AMBASSADOR D**
- KANSAS CITY MO 64153-1499**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1012. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/21/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

POPCHIPS
2846 S FALKENBURG RD
RIVERVIEW FL 33578-2563 |
| 2.1013. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/24/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

POWER CRUNCH A F N
POWER CRUNCH
7230 N CALDWELL AVE
NILES IL 60714-4502 |
| 2.1014. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/24/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

POWER CRUNCH A F N
POWER CRUNCH
7230 N CALDWELL AVE
NILES IL 60714-4502 |
| 2.1015. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/30/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

PRAISER IND TBL
PARISER INDUSTRIES
P O BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.1016. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

PRECISION ENGINEERED
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1017. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PRECISION ENGINEERED
P E P BRAININ
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 09/19/17
- List the contract number of any government contract** _____
- 2.1018. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PRECISION ENGINEERED
PEP
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 10/13/15
- List the contract number of any government contract** _____
- 2.1019. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PRECISION ENGINEERED
N N INC
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 11/22/17
- List the contract number of any government contract** _____
- 2.1020. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PRECISION ENGINEERED
PEP-BRAININ
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 11/22/17
- List the contract number of any government contract** _____
- 2.1021. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PREMIER PAINT ROLLER
30 VILLAGE CT
HAZLET NJ 07730-1533
- State the term remaining** DATED: 09/26/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1022. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/16/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PRINCE CASTLE
1601 ESTES AVE
ELK GROVE VILLAGE IL 60007-5409 |
| 2.1023. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PRIVATE LABEL SPECIA
PRIVATE LABEL
980 MAIN ST #3
WALTHAM MA 02451-7404 |
| 2.1024. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PRIVATE LABEL SPECIA
930 MAIN ST #3
WALTHAM MA 02451-7421 |
| 2.1025. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/09/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PRO TRANS
PRO TRANS INT'L CONS
PO BOX 42069
INDIANAPOLIS IN 46242-0069 |
| 2.1026. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
PRO TRANS
PRO TRANS INTL CONS
P O BOX 42069
INDIANAPOLIS IN 46242-0069 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1027. **Title of contract** CONFIRMATION OF COVERAGE BOUND FOR BINDER NO. 6879200 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED
- State the term remaining** EFFECTIVE NOV 20, 2018
- List the contract number of any government contract** _____
- PROFESSIONAL INSURANCE CONCEPTS
A DIV OF CRC INSURANCE SERVICES INC
389 INTERSPACE PARKWAY, 4TH FLOOR
PARSIPPANY NJ 07054
- 2.1028. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 11/22/17
- List the contract number of any government contract** _____
- PROSTAR
IMEX GLOBAL SOLUTION
5160 WILEY POST WAY
SALT LAKE CITY UT 84116-2833
- 2.1029. **Title of contract** SALES AGREEMENT FOR EQUIPMENT CHARGES **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SALES CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** _____
- List the contract number of any government contract** _____
- PROTECTION ONE
ALARM MONITORING INC
PO BOX 219044
KANSAS CITY MO 64121-9044
- 2.1030. **Title of contract** MOTOR CARRIER PUBLIC LIABILITY SURETY BOND WITH OMB NO.2126-0008 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SURETY CONTRACT
- Nature of debtor's interest** MOTOR CARRIER
- State the term remaining** 1/31/2020
- List the contract number of any government contract** _____
- PROTECTIVE INSURANCE COMPANY
EDWIN MCDOW
111 CONGRESSIONAL BLVD
CARMEL IN 46032
- 2.1031. **Title of contract** LARGE FLEET TRUCKING EXCESS CONTRACT (X-1964-17) **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- PROTECTIVE INSURANCE COMPANY
111 CONGRESSIONAL BLVD STE 500
CARMEL IN 46032

Debtor **New England Motor Freight, Inc.**

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- 2.1032. **Title of contract** COLLATERAL AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNITY CONTRACT
- Nature of debtor's interest** PRINCIPAL PROTECTIVE INSURANCE COMPANY
1099 NORTH MERIDIAN ST
INDIANAPOLIS IN 46204
- State the term remaining** EFFECTIVE FEB 10, 2002
- List the contract number of any government contract** _____
- 2.1033. **Title of contract** GENERAL AGREEMENT OF INDEMNITY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNITY CONTRACT
- Nature of debtor's interest** PRINCIPAL PROTECTIVE INSURANCE COMPANY
1099 NORTH MERIDIAN ST
INDIANAPOLIS IN 46204
- State the term remaining** EFFECTIVE FEB 10, 2002
- List the contract number of any government contract** _____
- 2.1034. **Title of contract** COLLATERAL AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNIFICATION
- Nature of debtor's interest** CONTRACT PARTY PROTECTIVE INSURANCE COMPANY
EDWIN MCDOW
111 CONGRESSIONAL BLVD
CARMEL IN 46032
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.1035. **Title of contract** GENERAL AGREEMENT OF INDEMNITY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNIFICATION
- Nature of debtor's interest** CONTRACT PARTY PROTECTIVE INSURANCE COMPANY
EDWIN MCDOW
111 CONGRESSIONAL BLVD
CARMEL IN 46032
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.1036. **Title of contract** SOLAR LOAN II AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER PUBLIC SERVICE ELECTRIC AND GAS COMPANY
ATTN: SOLAR LOAN PROGRAM ADMINISTRATOR
80 PARK PLAZA
T-8
NEWARK NJ 07012
- State the term remaining** 02/28/2027
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

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- 2.1037. **Title of contract** SOLAR LOAN II AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER PUBLIC SERVICE ELECTRIC AND GAS COMPANY
- State the term remaining** 02/28/2027 ATTN: SOLAR LOAN PROGRAM ADMINISTRATOR
- List the contract number of any government contract** _____ 80 PARK PLAZA
T-8
NEWARK NJ 07012
- 2.1038. **Title of contract** SOLAR LOAN II AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER PUBLIC SERVICE ELECTRIC AND GAS COMPANY
- State the term remaining** 09/30/2027 ATTN: SOLAR LOAN PROGRAM ADMINISTRATOR
- List the contract number of any government contract** _____ 80 PARK PLAZA
T-8
NEWARK NJ 07012
- 2.1039. **Title of contract** SOLAR LOAN II AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER PUBLIC SERVICE ELECTRIC AND GAS COMPANY
- State the term remaining** 09/30/2027 ATTN: SOLAR LOAN PROGRAM ADMINISTRATOR
- List the contract number of any government contract** _____ 80 PARK PLAZA
T-8
NEWARK NJ 07012
- 2.1040. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER PURITY WHOLESale GROUP
- State the term remaining** DATED: 03/28/18 PURITY WHOLESale GRO
- List the contract number of any government contract** _____ 5876 DARROW RD
HUDSON OH 44236-3864
- 2.1041. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER QUAD GRAPHICS
- State the term remaining** DATED: 09/12/15 N61 W23044 HARRYS WA
- List the contract number of any government contract** _____ SUSSEX WI 53089

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- | | | |
|---------|--|---|
| 2.1042. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 10/01/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

R B FOODS
R & B FOODS
P O BOX 2208
BRENTWOOD TN 37024-2208 |
| 2.1043. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 10/01/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

R B FOODS
R & B FOODS
P O BOX 2208
BRENTWOOD TN 37024-2208 |
| 2.1044. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 12/29/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

R B FOODS
MIZKAN AMERICA
P O BOX 2208
BRENTWOOD TN 37024-2208 |
| 2.1045. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 12/29/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

R B FOODS
MIZKAN AMERICA
P O BOX 2208
BRENTWOOD TN 37024-2208 |
| 2.1046. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 07/06/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

R C BIGELOW
R C BIGELOW INC
665 S GULPH RD #400
KING OF PRUSSIA PA 19406-3704 |

Debtor **New England Motor Freight, Inc.**

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- 2.1047. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER R H S H % PNGLC
R H SHEPPARD CO
P O BOX 123
AKRON PA 17501-0123
- State the term remaining** DATED: 03/30/17
- List the contract number of any government contract** _____
- 2.1048. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER R H S H % PNGLC
R H S H
P O BOX 123
AKRON PA 17501-0123
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1049. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER R P S PRODUCTS
4370 MALSBARY RD
BLUE ASH OH 45242-5653
- State the term remaining** DATED: 05/01/17
- List the contract number of any government contract** _____
- 2.1050. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER R X BAR
2040 ATLAS ST
COLUMBUS OH 43228-9645
- State the term remaining** DATED: 03/21/17
- List the contract number of any government contract** _____
- 2.1051. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RADIANT POOLS
440 N PEARL STREET
ALBANY NY 12207
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

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- 2.1052. **Title of contract** NEW JERSEY MOTOR VEHICLE LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE OF 2017 MERCEDES GLC, VIN 0698
- Nature of debtor's interest** LESSEE RAY CATENA MOTOR CAR CORP.
910 ROUTE 1
EDISON NJ 08817
- State the term remaining** 3/22/2020
- List the contract number of any government contract** _____
- 2.1053. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER REBUILDERS AUTOMOTIVE
SUPPLY BLUEGRACE
REBUILDERS AUTOMOTIV
SUPPLY BLUEGRACE
2846 S FALKENBURG RD
RIVERVIEW FL 33578-2563
- State the term remaining** DATED: 04/25/18
- List the contract number of any government contract** _____
- 2.1054. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RECON LOGISTICS LLC
384 INVERNESS PKWY
ENGLEWOOD CO 80112-5821
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1055. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RED DOOR SPA HOLDING
222 S MILL AVE #201
TEMPE AZ 85281-3738
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1056. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RED ROOSTER BEVERAGE
20 NORTH AVE EAST
ELIZABETH NJ 07201-2959
- State the term remaining** DATED: 09/20/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

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- | | | | |
|---------|---|--|---|
| 2.1057. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/18/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RED TAIL LOGISTICS
P O BOX 3835
ALLENTOWN PA 18106-0835 |
| 2.1058. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/30/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RED TAIL LOGISTICS
B D P SURFACE
P O BOX 3835
ALLENTOWN PA 18106-0835 |
| 2.1059. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/28/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
REDWOOD SUPPLY CHAIN
REDWOOD MULTIMODAL
P O BOX 51910
LIVONIA MI 48151-5910 |
| 2.1060. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RELIANCE MEDICAL
9100 W CHESTER TOWNE
WEST CHESTER OH 45069-3108 |
| 2.1061. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
REMA FOODS
P O BOX 67
SAINT LOUIS MO 63166-0067 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|---|--|
| 2.1062. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RHODE ISLAND NOVELTY
RHODE ISLAND TEXTILE
P O BOX 9133
CHELSEA MA 02150-9133 |
| 2.1063. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | LEASE AGREEMENT
RICHMOND TERMINAL # 38 REAL PROPERTY LEASE -
6110 JEFFERSON DAVIS HWY, RICHMOND, VA 23234
LESSEE
3/31/2020
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RICHMOND TERMINAL LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.1064. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/20/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RIKON TOOLS
RIKON POWER TOOLS
300 ELM ST #1
MILFORD NH 03055-4715 |
| 2.1065. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RITEMADE
RITEMADE PAPER CONVE
151 JOHN JAMES AUDUB
AMHERST NY 14228-1111 |
| 2.1066. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/29/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RIVIANA FOODS
P O BOX 17638
SAINT LOUIS MO 63178-7638 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1067. **Title of contract** LEASE & LETTER AGREEMENTS
- State what the contract or lease is for** JOLIET TERMINAL # 39 REAL PROPERTY LEASE - 23348 WEST EAMES ST, CHANNAHON, IL 60410
- Nature of debtor's interest** LESSEE
- State the term remaining** 10/15/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- RLF I-A SPE, LLC
REALTERM NAT
PAUL UNDERWOOD, SVP
PORTFOLIO MANAGEMENT
201 WEST STREET, SUITE 200
ANNAPOLIS MD 21401
- 2.1068. **Title of contract** SHIPPERS INTEREST CAR
- State what the contract or lease is for** POLICY NO. CAR 050 0036
- Nature of debtor's interest** INSURED
- State the term remaining** 6/15/2019
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- RLI INSURANCE COMPANY
9025 N. LINDBERGH DRIVE
PEORIA IL 61615
- 2.1069. **Title of contract** AGREEMENT WITH POLICY NO. CAR0500036
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURANCE CONTRACT
- State the term remaining** _____
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- RLI INSURANCE COMPANY
9025 N LINDBERGH DRIVE
PEORIA IL 61615
- 2.1070. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 03/06/17
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- ROLAND FOODS PENSKE
ROLAND FOODS LLC
P O BOX 981763
EL PASO TX 79998-1763
- 2.1071. **Title of contract** CUSTOMER CONTRACT
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER
- State the term remaining** DATED: 09/20/17
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- ROLF C HAGEN CORP
P O BOX 9506
AMHERST NY 14226-9506

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1072. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYAL BRASS
ROYAL BRASS & HOSE
P O BOX 51468
KNOXVILLE TN 37950-1468
- State the term remaining** DATED: 02/01/17
- List the contract number of any government contract** _____
- 2.1073. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYAL BRASS
ROYAL BRASS & HOSE
P O BOX 51468
KNOXVILLE TN 37950-1468
- State the term remaining** DATED: 02/01/17
- List the contract number of any government contract** _____
- 2.1074. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYCE COLORS
ROYCE GLOBAL
35 CARLTON AVE
EAST RUTHERFORD NJ 07073-1613
- State the term remaining** DATED: 09/18/17
- List the contract number of any government contract** _____
- 2.1075. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYCE COLORS E RUTHERFORD
ROYCE GLOBAL
35 MORTON ST
EAST RUTHERFORD NJ 07073
- State the term remaining** DATED: 09/18/17
- List the contract number of any government contract** _____
- 2.1076. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYCE COLORS PATERSON
ROYCE GLOBAL
35 MORTON ST
EAST RUTHERFORD NJ 07073
- State the term remaining** DATED: 09/18/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1077. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYCE INTL
GABRIEL PERFORMANCE
3400 SOUTH TAMiami T
SARASOTA FL 34239-6023
- State the term remaining** DATED: 08/24/17
- List the contract number of any government contract** _____
- 2.1078. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYCE INTL
GABRIEL PERFORMANCE
3400 SOUTH TAMiami T
SARASOTA FL 34239-6023
- State the term remaining** DATED: 08/24/17
- List the contract number of any government contract** _____
- 2.1079. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYCE INTL
GABRIEL PERFORMANCE
3400 SOUTH TAMiami T
SARASOTA FL 34239-6023
- State the term remaining** DATED: 08/24/17
- List the contract number of any government contract** _____
- 2.1080. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER ROYCE INTL
GABRIEL PERFORMANCE
3400 SOUTH TAMiami T
SARASOTA FL 34239-6023
- State the term remaining** DATED: 08/24/17
- List the contract number of any government contract** _____
- 2.1081. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RUBBER SOUL BREWING
P O BOX 5176
HARRISBURG PA 17110-0176
- State the term remaining** DATED: 04/27/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|--|--|
| 2.1082. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 03/08/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

RUBBERCYCLE LLC
372 E KENNEDY BLVD
LAKEWOOD NJ 08701-1434 |
| 2.1083. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 09/07/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

RUBBERFORM PRODS
RUBBERFORM RECYCLED
75 MICHIGAN ST
LOCKPORT NY 14094-2629 |
| 2.1084. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 10/15/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

RUDIS HOLDINGS
RUDIS HOLDINGS LLC
5480 LINGLESTOWN RD
HARRISBURG PA 17112-9190 |
| 2.1085. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

RUGER LLC
4207 BRADLEY LANE
CHEVY CHASE MD 20815-5234 |
| 2.1086. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 10/27/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

RUGER LLC
4207 BRADLEY LANE
CHEVY CHASE MD 20815-5234 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1087. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RUGER LLC
4207 BRADLEY LANE
CHEVY CHASE MD 20815-5234
- State the term remaining** DATED: 12/16/15
- List the contract number of any government contract** _____
- 2.1088. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RUSSELECTRIC INC
PO BOX 9133
CHELSEA MA 02150-9133
- State the term remaining** DATED: 10/19/17
- List the contract number of any government contract** _____
- 2.1089. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER RUTAN POLY INDS
RUTAN POLY INDS INC
39 SIDING PLACE
MAHWAH NJ 07430-1896
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1090. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER S AND H
ELYRIA SPRINGS & SPE
FREEDOM LOGISTICS
360 W BUTTERFIELD RD
ELMHURST IL 60126-5041
- State the term remaining** DATED: 01/06/18
- List the contract number of any government contract** _____
- 2.1091. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER S AND H
ELYRIA SPRINGS & SPE
FREEDOM LOGISTICS
360 W BUTTERFIELD RD
ELMHURST IL 60126-5041
- State the term remaining** DATED: 01/06/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|--|---|
| 2.1092. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 05/06/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S AND H
S & H INDUSTRIES
FREEDOM LOGISTICS
360 W BUTTERFIELD RD
ELMHURST IL 60126-5068 |
| 2.1093. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 05/06/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S AND H
S & H INDUSTRIES
FREEDOM LOGISTICS
360 W BUTTERFIELD RD
ELMHURST IL 60126-5068 |
| 2.1094. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 05/31/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S PARKER HARDWARE
P O BOX 9882
ENGLEWOOD NJ 07631-6882 |
| 2.1095. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 07/26/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S Q P
TECH TRANSPORT
300 ELM STREET UNIT
MILFORD NH 03055-4715 |
| 2.1096. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 09/27/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S Q P
KARI OUT PRODUCTS
TECH TRANSPORT
300 ELM STREET #1
MILFORD NH 03055-4715 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1097. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER S Q P
TIPAK INDUSTRIAL USA
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 10/01/18
- List the contract number of any government contract** _____
- 2.1098. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER S Q P
TECH TRANSPORT
300 ELM STREET #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 10/18/16
- List the contract number of any government contract** _____
- 2.1099. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER S S PACKAGING
S & S PACKAGING
P O BOX 234
CRANESVILLE PA 16410-0234
- State the term remaining** DATED: 01/14/19
- List the contract number of any government contract** _____
- 2.1100. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER S W R INC
P O BOX 856
EBENSBURG PA 15931-0856
- State the term remaining** DATED: 01/18/16
- List the contract number of any government contract** _____
- 2.1101. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER S WALTER PKG CORP
PO BOX 16223
PHILADELPHIA PA 19114-0223
- State the term remaining** DATED: 03/05/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|--|--|
| 2.1102. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 03/26/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S WALTER PKG CORP
S WALTER PACKAGING
PO BOX 16223
PHILADELPHIA PA 19114-0223 |
| 2.1103. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 03/26/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S WALTER PKG CORP
S WALTER PACKAGING
PO BOX 16223
PHILADELPHIA PA 19114-0223 |
| 2.1104. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 03/26/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S WALTER PKG CORP
S WALTER PACKAGING
PO BOX 16223
PHILADELPHIA PA 19114-0223 |
| 2.1105. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 03/26/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

S WALTER PKG CORP
S WALTER PACKAGING C
P O BOX 16223
PHILADELPHIA PA 19114-0223 |
| 2.1106. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 07/10/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SADDLE CREEK LOGISTICS
SADDLE CREEK LOGISTI
P O BOX 90819
LAKELAND FL 33804-0819 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1107. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | APPENDIX TO INTERLINE CONTRACT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 03/23/2018
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SAIA MOTOR FREIGHT LINES, INC.
P O BOX 730532
DALLAS TX 75373 |
| 2.1108. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | APPENDIX TO INTERLINE CONTRACT
TRAILER INTERCHANGE AGREEMENT
CONTRACTOR - INTERCHANGE AGMT
DATED: 03/23/2018
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SAIA MOTOR FREIGHT LINES, INC.
P O BOX 730532
DALLAS TX 75373 |
| 2.1109. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/01/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SALLY BEAUTY
SALLY BEAUTY SUPPLY
P O BOX 490
DENTON TX 76202-0490 |
| 2.1110. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/20/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SALLY BEAUTY
ARCADIA BEAUTY LABS
P O BOX 490
DENTON TX 76202-0490 |
| 2.1111. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SAM-SON DIST
SAM-SON DISTRIBUTION
P O BOX 248
BUFFALO NY 14225-0248 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1112. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SANDUSKY LEE**
- State the term remaining** DATED: 03/24/16 **SANDUSKY LEE CORP**
- List the contract number of any government contract** _____ **80 KEYSTONE ST**
- LITTLESTOWN PA 17340-1664**
- 2.1113. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **SANTANDER BANK, N.A.**
- State the term remaining** 03/20/2024 **75 STATE STREET**
- List the contract number of any government contract** _____ **BOSTON MA 02109**
- 2.1114. **Title of contract** CLEAN IRREVOCABLE CREDIT NO. 8951 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CREDIT AGREEMENT
- Nature of debtor's interest** BORROWER **SANTANDER BANK, N.A.**
- State the term remaining** 03/31/2019 **COMMERCIAL LOAN SERVICES**
- List the contract number of any government contract** _____ **3 TERRY DRIVE, 1ST FL**
- NEWTOWN PA 18940**
- 2.1115. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **SANTANDER BANK, N.A.**
- State the term remaining** 07/15/2022 **75 STATE STREET**
- List the contract number of any government contract** _____ **BOSTON MA 02109**
- 2.1116. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **SANTANDER BANK, N.A.**
- State the term remaining** 07/15/2022 **75 STATE STREET**
- List the contract number of any government contract** _____ **BOSTON MA 02109**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1117. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 09/05/2025
- List the contract number of any government contract** _____
- 2.1118. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 09/25/2022
- List the contract number of any government contract** _____
- 2.1119. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 03/05/2022
- List the contract number of any government contract** _____
- 2.1120. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 03/05/2022
- List the contract number of any government contract** _____
- 2.1121. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 03/10/2023
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1122. **Title of contract** CLEAN IRREVOCABLE CREDIT NO. 8951 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CREDIT AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
COMMERCIAL LOAN SERVICES
3 TERRY DRIVE, 1ST FL
NEWTOWN PA 18940
- State the term remaining** 03/31/2019
- List the contract number of any government contract** _____
- 2.1123. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 08/20/2021
- List the contract number of any government contract** _____
- 2.1124. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 08/20/2025
- List the contract number of any government contract** _____
- 2.1125. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 10/15/2020
- List the contract number of any government contract** _____
- 2.1126. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 10/15/2022
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1127. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 12/10/2023
- List the contract number of any government contract** _____
- 2.1128. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER SANTANDER BANK, N.A.
75 STATE STREET
BOSTON MA 02109
- State the term remaining** 12/20/2025
- List the contract number of any government contract** _____
- 2.1129. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SAVORIAN
P O BOX 90202
BROOKLYN NY 11209-0202
- State the term remaining** DATED: 06/23/17
- List the contract number of any government contract** _____
- 2.1130. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SCANDIA PLASTICS
SCANDIA PLASTICS INC
PO BOX 179
PLAISTOW NH 03865-0179
- State the term remaining** DATED: 05/30/18
- List the contract number of any government contract** _____
- 2.1131. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SCARBOROUGH INTL
10841 NW AMBASSADOR
KANSAS CITY MO 64153-1241
- State the term remaining** DATED: 12/30/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|--|--|
| 2.1132. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 10/19/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHEERER BEARING
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1133. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 12/22/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHEERER BEARING
SCHEERER
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1134. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 12/22/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHEERER BEARING
SCHEERER
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1135. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 12/22/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHEERER BEARING
SCHEERER
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1136. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 12/22/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHEERER BEARING
SCHEERER BEARING COR
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1137. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SCHERER BEARING**
- State the term remaining** DATED: 12/22/16 **SCHERER BEARING COR**
- List the contract number of any government contract** _____ **P O BOX 23000**
HICKORY NC 28603-0230
- 2.1138. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SCHERER BEARING**
- State the term remaining** DATED: 12/22/16 **SCHERER BEARING COR**
- List the contract number of any government contract** _____ **TRANS INSIGHT**
P O BOX 23000
HICKORY NC 28603-0230
- 2.1139. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SCHERER BEARING**
- State the term remaining** DATED: 12/22/16 **TRANS INSIGHT**
- List the contract number of any government contract** _____ **P O BOX 23000**
HICKORY NC 28603-0230
- 2.1140. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SCHERER BEARING**
- State the term remaining** DATED: 12/22/16 **TRANS INSIGHT**
- List the contract number of any government contract** _____ **P O BOX 23000**
HICKORY NC 28603-0230
- 2.1141. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SCHLOTTERBECK & FOSS**
- State the term remaining** DATED: 06/25/15 **3 LEDGEVIEW DR**
- List the contract number of any government contract** _____ **WESTBROOK ME 04092-3939**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1142. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 12/03/16

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHNEIDER TRANS MGMT
BLANKET
SCHNEIDER TRANS MGMT
P O BOX 2560
GREEN BAY WI 54306-2560 |
| 2.1143. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 03/23/18

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHOOL KIDZ
SCHOOLKIDZ
900 S FRONTAGE RD
WOODRIDGE IL 60517-4902 |
| 2.1144. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 06/02/17

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHOOLSIN
P O BOX 62026
CINCINNATI OH 45262-0026 |
| 2.1145. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | CUSTOMER CONTRACT

CUSTOMER CONTRACT

CUSTOMER

DATED: 12/09/16

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHULZE BURCH
SCHULZE & BURCH BISC
1213 REMINGTON BLVD
ROMEOVILLE IL 60446-6504 |
| 2.1146. | Title of contract

State what the contract or lease is for

Nature of debtor's interest

State the term remaining

List the contract number of any government contract | LEASE AGREEENT

SYRACUSE TERMINAL # 55 REAL PROPERTY LEASE -
7201 SCHUYLER ROAD, EAST SYRACUSE, NY 13057

LESSEE

12/31/2026

_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCHUYLER ROAD CORP
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1147. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SEA WATCH INT L**
- State the term remaining** DATED: 06/25/15 **SEA WATCH INT'L INC**
- List the contract number of any government contract** _____ **8978 GLEBE PARK DR**
- EASTON MD 21601-7004**
- 2.1148. **Title of contract** THIRD LEASE AMENDMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CLEVELAND TERMINAL # 33 REAL PROPERTY LEASE - 3024 BRECKSVILLE ROAD, SUITE A, RICHFIELD, OH 44286
- Nature of debtor's interest** LESSEE **SEABREEZE NORTH CORPORATION**
- State the term remaining** 11/30/2020 **2958 BRECKSVILLE ROAD**
- List the contract number of any government contract** _____ **PO BOX 535**
- RICHFIELD OH 44286-0535**
- 2.1149. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SEEDWAY**
- State the term remaining** DATED: 07/17/17 **P O BOX 250**
- List the contract number of any government contract** _____ **HALL NY 14463-0250**
- 2.1150. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SEEDWAYLLLC**
- State the term remaining** DATED: 10/04/18 **SEEDWAY LLC**
- List the contract number of any government contract** _____ **P O BOX 250**
- HALL NY 14463-0250**
- 2.1151. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SELECT NUTRITION**
- State the term remaining** DATED: 06/25/15 **TECH LOGISTICS**
- List the contract number of any government contract** _____ **300 ELM ST #1**
- MILFORD NH 03055-4715**

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|--|
| 2.1152. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/17/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SELECT WINE IMPORTS
27 DALE ST
CHESTNUT HILL MA 02467-2916 |
| 2.1153. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SELECT WINE IMPORTS
27 DALE ST
CHESTNUT HILL MA 02467-2916 |
| 2.1154. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/05/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SERVICE PUMP AND SUPPLY
SERVICE PUMP AND SUP
P O BOX 2097
HUNTINGTON WV 25721-2097 |
| 2.1155. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 08/07/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SETAF
3314 LONG POINT DR
TOMS RIVER NJ 08753-4827 |
| 2.1156. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/15/17
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SHENANDOAH IND RUBBER
SHENANDOAH IND RUBBE
P O BOX 1046
SALEM VA 24153-1046 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|--|--|
| 2.1157. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 01/25/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SHERMAN SPECIALTY
WOWLINE
141 EILEEN WAY
SYOSSET NY 11791-5302 |
| 2.1158. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 01/25/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SHERMAN SPECIALTY
141 EILEEN WAY
SYOSSET NY 11791-5302 |
| 2.1159. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 04/16/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SHERMAN SPECIALTY
KIDS IMPORTS
141 EILEEN WAY
SYOSSET NY 11791-5302 |
| 2.1160. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 03/03/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SHIBUYA HOPPMAN
SHIBUYA HOPPMANN
P O BOX 879
MADISON HEIGHTS VA 24572-0879 |
| 2.1161. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SHIPMAN PRINTING IND
P O BOX 357
NIAGARA FALLS NY 14304-0357 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1162. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SHIPYARD BREWING
SHIPYARD BREWING CO
86 NEWBURY ST
PORTLAND ME 04101-4274
- State the term remaining** DATED: 01/25/17
- List the contract number of any government contract** _____
- 2.1163. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SHREWSBURY MACHINE
SHREWSBURY MACHINE A
P O BOX 1120
ATHENS WV 24712-1120
- State the term remaining** DATED: 12/16/16
- List the contract number of any government contract** _____
- 2.1164. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SILVER PALATE
SILVER PALATE KITCHEN
211 KNICKERBOCKER RD
CRESSKILL NJ 07626-1830
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1165. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SIMMONS MACHINE TOOL
1700 NORTH BROADWAY
ALBANY NY 12204-2701
- State the term remaining** DATED: 07/30/18
- List the contract number of any government contract** _____
- 2.1166. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SIMPLICITYS EDGE
40 HOLLINGSHEAD RD
INGERSOLL ON N5C0B5
CANADA
- State the term remaining** DATED: 02/08/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1167. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SLANTSHACK JERKY
REDHAWK GLOBAL
P O BOX 2946
COLUMBUS OH 43216-2946
- State the term remaining** DATED: 11/01/16
- List the contract number of any government contract** _____
- 2.1168. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SLINGSHOT TRANS
SLINGSHOT TRANSPORTA
P O BOX 610
BROOKLYN NY 11201-0610
- State the term remaining** DATED: 11/17/16
- List the contract number of any government contract** _____
- 2.1169. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SMALL VALLEY MILLING
1188 MOUNTAIN HOUSE
HALIFAX PA 17032-9208
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1170. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SOKOL & CO
SOKOL
CHRLTL
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051
- State the term remaining** DATED: 09/09/15
- List the contract number of any government contract** _____
- 2.1171. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SOURCE ALLIANCE
2023 W CARROLL AVE C
CHICAGO IL 60612-1682
- State the term remaining** DATED: 06/14/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|--|-------------------|---|
| 2.1172. | Title of contract | CUSTOMER CONTRACT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SOURCE LOGISTICS
812 UNION ST
MONTEBELLO CA 90640-6523 |
| | State what the contract or lease is for | CUSTOMER CONTRACT | |
| | Nature of debtor's interest | CUSTOMER | |
| | State the term remaining | DATED: 08/03/17 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.1173. | Title of contract | CUSTOMER CONTRACT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SOUTH HILL CIDER
560 WEST KING RD
ITHACA NY 14850-8608 |
| | State what the contract or lease is for | CUSTOMER CONTRACT | |
| | Nature of debtor's interest | CUSTOMER | |
| | State the term remaining | DATED: 07/11/18 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.1174. | Title of contract | CUSTOMER CONTRACT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SOUTH/WIN LTD
P O BOX 20461
GREENSBORO NC 27420-0461 |
| | State what the contract or lease is for | CUSTOMER CONTRACT | |
| | Nature of debtor's interest | CUSTOMER | |
| | State the term remaining | DATED: 06/25/15 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.1175. | Title of contract | CUSTOMER CONTRACT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SOUTHEASTERN TEXTILE
P O BOX 921
DANVILLE VA 24543-0921 |
| | State what the contract or lease is for | CUSTOMER CONTRACT | |
| | Nature of debtor's interest | CUSTOMER | |
| | State the term remaining | DATED: 05/19/16 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.1176. | Title of contract | CUSTOMER CONTRACT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SOUTHERN TIER BREWIN
PO BOX 166 - 2051A S
LAKEWOOD NY 14750-0166 |
| | State what the contract or lease is for | CUSTOMER CONTRACT | |
| | Nature of debtor's interest | CUSTOMER | |
| | State the term remaining | DATED: 06/25/15 | |
| | List the contract number of any government contract | _____ | |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1177. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SOUTHERN TIRE CUSTOM
1322 COLLEGE AVE
ELMIRA NY 14901-1156
- State the term remaining** DATED: 07/25/16
- List the contract number of any government contract** _____
- 2.1178. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPARTAN BRANDS
451 PARK AVE SOUTH
NEW YORK NY 10016-7390
- State the term remaining** DATED: 03/27/18
- List the contract number of any government contract** _____
- 2.1179. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPECTRUM PLASTICS
12641 166TH STREET
CERRITOS CA 90703-2101
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1180. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPECTRUM PLASTICS
I P S INDUSTRIES
12641 166TH STREET
CERRITOS CA 90703-2101
- State the term remaining** DATED: 11/22/16
- List the contract number of any government contract** _____
- 2.1181. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPECTRUM POLY
SPECTRUM POLY INC
27 ROSELLE CT
LAKEWOOD NJ 08701-1572
- State the term remaining** DATED: 10/30/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1182. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPECTRUM POLY
SPECTRUM POLY INC
27 ROSELLE CT
LAKEWOOD NJ 08701-1572
- State the term remaining** DATED: 10/30/18
- List the contract number of any government contract** _____
- 2.1183. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPECTRUM POLY
SPECTRUM POLY INC
27 ROSELLE CT
LAKEWOOD NJ 08701-1572
- State the term remaining** DATED: 10/30/18
- List the contract number of any government contract** _____
- 2.1184. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPECTRUM POLY
27 ROSELLE CT
LAKEWOOD NJ 08701-1572
- State the term remaining** DATED: 10/30/18
- List the contract number of any government contract** _____
- 2.1185. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPEED GLOBAL SERVICE
WAREHOUSE DIV
SPEED GLOBAL SERVICE
P O BOX 738
KENMORE NY 14217-0738
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1186. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SPILLERS
SPILLERS REPROGRAPHI
P O BOX 1638
LEWISTON ME 04241-1638
- State the term remaining** DATED: 01/25/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1187. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **SPILLERS**
- State the term remaining** DATED: 04/15/16 **SPILLERS REPROGRAPHI**
- List the contract number of any government contract** _____ **P O BOX 1638**
LEWISTON ME 04240
- 2.1188. **Title of contract** LEASE AGREEENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SPRINGFIELD TERMINAL # 08 REAL PROPERTY LEASE - 1311 UNION STREET, SPRINGFIELD, MA 01089
- Nature of debtor's interest** LESSEE **SPRINGFIELD TERMINAL CORP**
- State the term remaining** 11/30/2010 **C/O AMZ MANAGEMENT LLC**
- List the contract number of any government contract** _____ **1-71 NORTH AVENUE EAST**
ELIZABETH NJ 07201
- 2.1189. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ST FREIGHT**
- State the term remaining** DATED: 02/16/17 **P O BOX 1147**
MANITOWOC WI 54221-1147
- List the contract number of any government contract** _____
- 2.1190. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ST KILLIAN IMPORTING**
- State the term remaining** DATED: 06/25/15 **170 MARKET STREET**
EVERETT MA 02149-5808
- List the contract number of any government contract** _____
- 2.1191. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **ST KILLIAN IMPORTING**
- State the term remaining** DATED: 11/13/15 **170 MARKET ST**
EVERETT MA 02149
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|---|--|
| 2.1192. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/16/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ST LOUIS GROUP
8888 KEYSTONE CROSSI
INDIANAPOLIS IN 46240-4640 |
| 2.1193. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | FREIGHT FORWARDERS LEGAL LIABILITY
POLICY NO. 2T00594
INSURED
6/16/2019
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ST. PAUL FIRE & MARINE INS CO
201 COUNTY BLVD., SUITE 505
BRAMPTON ON L6W 4L2
CANADA |
| 2.1194. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
STANDARD MFG CO
STANDARD MFG CO INC
P O BOX 380
TROY NY 12182-0380 |
| 2.1195. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/26/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
STANPAC
P O BOX 584
LEWISTON NY 14092-0584 |
| 2.1196. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
STAR WIPERS
STAR WIPERS INC
1067 MOSTOUR WEST
CORAOPOLIS PA 15108 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1197. **Title of contract** CYBER LIABILITY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 1000600133171
- Nature of debtor's interest** INSURED STARR INDEMNITY & LIABILITY CO
399 PARK AVE, 2ND FL
NEW YORK NY 10022
- State the term remaining** 12/4/2019
- List the contract number of any government contract** _____
- 2.1198. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER STAUFFER GLOVE SAFETY
STAUFFER GLOVE & SAF
P O BOX 45
RED HILL PA 18076-0045
- State the term remaining** DATED: 08/14/18
- List the contract number of any government contract** _____
- 2.1199. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER STEAM LOGISTICS
835 GEORGIA AVE
CHATTANOOGA TN 37402-2232
- State the term remaining** DATED: 04/26/17
- List the contract number of any government contract** _____
- 2.1200. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER STEEL & WIRE PRODUCTS
STEEL & WIRE NORTH E
P O BOX 446
BALTIMORE MD 21203-0446
- State the term remaining** DATED: 07/13/18
- List the contract number of any government contract** _____
- 2.1201. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER STEEL & WIRE PRODUCTS
STEEL & WIRE PROD
P O BOX 207
BALTIMORE MD 21203-0207
- State the term remaining** DATED: 09/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1202. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/01/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

STEINMART
1200 RIVERPLACE BLVD
JACKSONVILLE FL 32207-9046 |
| 2.1203. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

STEPHEN GOULD
STEPHEN GOULD CORP
35 S JEFFERSON RD
WHIPPANY NJ 07981-1043 |
| 2.1204. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

STEVEN WILLAND
23 RTE 206
AUGUSTA NJ 07822-0009 |
| 2.1205. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

STIHL
STIHL INC
P O BOX 2015
VIRGINIA BEACH VA 23450-2015 |
| 2.1206. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

STONE CREEK VENEER
256 VIRGIN RUN RD
VANDERBILT PA 15486-1138 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1207. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER STOVER CO
STOVER & CO
P O BOX 188
CHESWICK PA 15024-0188
- State the term remaining** DATED: 02/18/16
- List the contract number of any government contract** _____
- 2.1208. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER STRYKER C H ROBINSON
STRYKER
CHRLTL
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051
- State the term remaining** DATED: 06/01/18
- List the contract number of any government contract** _____
- 2.1209. **Title of contract** NATIONAL ACCOUNT PROPANE GAS AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SALES CONTRACT
- Nature of debtor's interest** BUYER SUBURBAN PROPANE LP
240 ROUTE 10 WEST
WHIPPANY NJ 07981
- State the term remaining** 2019
- List the contract number of any government contract** _____
- 2.1210. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUMMIT LUBRICANTS
4D TREADEASY AVE
BATAVIA NY 14020-3010
- State the term remaining** DATED: 10/06/16
- List the contract number of any government contract** _____
- 2.1211. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUMNER PRINTING
433 ROUTE 108
SOMERSWORTH NH 03878-2043
- State the term remaining** DATED: 04/27/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|--|
| 2.1212. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
CAFE VITTORIA
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1213. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
CAFE VITTORIA
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1214. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
S & D COFFEE
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1215. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
S & D COFFEE
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1216. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
THIRSTY VENTURES
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|--|
| 2.1217. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
THIRSTY VENTURES
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1218. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1219. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 02/01/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
102 KIMBALL AVE
SOUTH BURLINGTON VT 05401 |
| 2.1220. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/30/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
CAFE VITTORIA
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1221. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/30/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SUNNY SKY PRODUCTS
S & D COFFEE
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|--|
| 2.1222. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/30/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SUNNY SKY PRODUCTS
SUNNY SKY PRODUCTS N
102 KIMBALL AVE
SOUTH BURLINGTON VT 05401 |
| 2.1223. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/30/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SUNNY SKY PRODUCTS
SUNNY SKY PRODUCTS N
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1224. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/30/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SUNNY SKY PRODUCTS
SUNNY SKY PRODUCTS N
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |
| 2.1225. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/30/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SUNNY SKY PRODUCTS
102 KIMBALL ST
SOUTH BURLINGTON VT 05403-6800 |
| 2.1226. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/25/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SUNNY SKY PRODUCTS
SUNNY SKY PRODS NORT
102 KIMBALL AVE
SOUTH BURLINGTON VT 05403-6800 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1227. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUNORA FOODS LTD
4616 VALIANT DR NW
CALGARY AB T3A0X9
- State the term remaining** DATED: 11/14/16
- List the contract number of any government contract** _____
- 2.1228. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUPERHEAT FREIGHT
SUPERHEAT FREIGHT SE
313 GARNET DR
NEW LENOX IL 60451-3503
- State the term remaining** DATED: 08/29/16
- List the contract number of any government contract** _____
- 2.1229. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUPERHEAT FREIGHT1
SUPERHEAT FREIGHT SE
313 GARNET DRIVE
NEW LENOX IL 60451-3503
- State the term remaining** DATED: 09/09/16
- List the contract number of any government contract** _____
- 2.1230. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUPERIOR NUT CO
P O BOX 410086
CAMBRIDGE MA 02141-0001
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1231. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUPERIOR NUT CO
SUPERIOR NUT CO INC
P O BOX 410086
CAMBRIDGE MA 02141-0001
- State the term remaining** DATED: 11/19/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1232. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUPPLY ONE
M G N LOGISTICS
712 FERRY STREET
EASTON PA 18042-4324
- State the term remaining** DATED: 10/15/15
- List the contract number of any government contract** _____
- 2.1233. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SUTHERLAND WELLS
SUTHERLAND WELLES
P O BOX 180
NORTH HYDE PARK VT 05665-0180
- State the term remaining** DATED: 05/10/16
- List the contract number of any government contract** _____
- 2.1234. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SWAN LABEL
SWAN LABEL & TAG
P O BOX 308
CORAOPOLIS PA 15108-0308
- State the term remaining** DATED: 11/05/15
- List the contract number of any government contract** _____
- 2.1235. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SWEET PEET
P O BOX 55
LITCHFIELD CT 06759-0055
- State the term remaining** DATED: 04/18/18
- List the contract number of any government contract** _____
- 2.1236. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SWEET PEET
P O BOX 55
LITCHFIELD CT 06759-0055
- State the term remaining** DATED: 04/18/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1237. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SYMAK SALES
SYMAK SALES CO INC
P O BOX 2202
PLATTSBURGH NY 12901-0316
- State the term remaining** DATED: 04/14/17
- List the contract number of any government contract** _____
- 2.1238. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SYNERGIE CANADA
60 RUE EMILIEN MARCO
BLAINVILLE QC J7C0B5
- State the term remaining** DATED: 01/23/19
- List the contract number of any government contract** _____
- 2.1239. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER SYNERGIE CANADA
60 RUE EMILIEN MARCO
BLAINVILLE QC J7C0B5
- State the term remaining** DATED: 01/23/19
- List the contract number of any government contract** _____
- 2.1240. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TALATRANS WORLDWIDE
TALATRANS WORLDWIDE
P O BOX 835
ITASCA IL 60143-0835
- State the term remaining** DATED: 02/23/16
- List the contract number of any government contract** _____
- 2.1241. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TANNIN CORP
MANN DISTRIBUTION
3134 POST ROAD
WARWICK RI 02886-7158
- State the term remaining** DATED: 11/19/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1242. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 04/15/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TARGET C/O NFI CROSS
N F I L
1515 BURNT MILL RD
CHERRY HILL NJ 08003-3637 |
| 2.1243. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/05/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TARGET CORP C H ROBINSON
SUPER TARGET
CHRLTL
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051 |
| 2.1244. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/05/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TARGET CORP C H ROBINSON
TARGET CORP
CHRLTL
14800 CHARLSON RD #2
EDEN PRAIRIE MN 55347-5051 |
| 2.1245. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/24/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TARGET FREIGHT
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507 |
| 2.1246. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/28/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TARGET INDUSTRIAL
P O BOX 445
GLENSHAW PA 15116-0445 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1247. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TASMAN LEATHER GROUP
P O BOX 400
HARTLAND ME 04943-0400 |
| 2.1248. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/01/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TBL F P WOLL
F P WOLL & COMPANY
PO BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.1249. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/01/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TBL M C S
M C S INDUSTRIES
TBL SERVICES
PO BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.1250. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 11/22/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TBL MEMRY
MEMRY CORP
T B L
P O BOX 3838
ALLENTOWN PA 18106-0838 |
| 2.1251. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/01/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TBL PHILLIPS PET FOOD
PHILLIPS PET FOOD & SUPPLIES T B L SVC
P O BOX 3838
ALLENTOWN PA 18106-0838 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1252. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TBL S F S
S F S INTEC
TBL SERVICES
PO BOX 3838
ALLENTOWN PA 18106-0838
- State the term remaining** DATED: 12/01/15
- List the contract number of any government contract** _____
- 2.1253. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TBL S F S
S F S INTEC
TBL SERVICES
PO BOX 3838
ALLENTOWN PA 18106-0838
- State the term remaining** DATED: 12/05/15
- List the contract number of any government contract** _____
- 2.1254. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TBL VIGON
VIGON INTL INC
TBL SERVICES
PO BOX 3838
ALLENTOWN PA 18106-0838
- State the term remaining** DATED: 12/01/15
- List the contract number of any government contract** _____
- 2.1255. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 01/25/2023
- List the contract number of any government contract** _____
- 2.1256. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 03/27/2024
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1257. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 03/30/2023
- List the contract number of any government contract** _____
- 2.1258. **Title of contract** IRREVOCABLE LETTER OF CREDIT NO. 20008379 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CREDIT AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
GLOBAL TRADE FINANCE
6000 ATRIUM WAY
MT. LAUREL NJ 08054
- State the term remaining** 04/01/2019
- List the contract number of any government contract** _____
- 2.1259. **Title of contract** IRREVOCABLE LETTER OF CREDIT NO. 20008379 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CREDIT AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
GLOBAL TRADE FINANCE
6000 ATRIUM WAY
MT. LAUREL NJ 08054
- State the term remaining** 04/01/2019
- List the contract number of any government contract** _____
- 2.1260. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 04/19/2023
- List the contract number of any government contract** _____
- 2.1261. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 05/24/2023
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1262. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 08/23/2025
- List the contract number of any government contract** _____
- 2.1263. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 09/27/2023
- List the contract number of any government contract** _____
- 2.1264. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 11/16/2022
- List the contract number of any government contract** _____
- 2.1265. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 11/2023
- List the contract number of any government contract** _____
- 2.1266. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AND SECURITY AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 12/01/2023
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1267. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 12/11/2023
- List the contract number of any government contract** _____
- 2.1268. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 3/2024
- List the contract number of any government contract** _____
- 2.1269. **Title of contract** TERM NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER TD BANK, N.A.
1100 LAKE STREET
RAMSEY NJ 07446
- State the term remaining** 5/2025
- List the contract number of any government contract** _____
- 2.1270. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH COMPANY C
COMPANY C
TECH LOGISTICS
P O BOX 431
MILFORD NH 03055-0431
- State the term remaining** DATED: 11/22/17
- List the contract number of any government contract** _____
- 2.1271. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH EXERGEN
EXERGEN CORP
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 09/19/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1272. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH KENNETH CROSBY
KENNETH CROSBY INC
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1273. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH KENNETH CROSBY
KENNETH CROSBY
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 11/02/16
- List the contract number of any government contract** _____
- 2.1274. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH LOG WORKPLACE MODULAR
WORKPLACE MODULAR SY
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 03/16/17
- List the contract number of any government contract** _____
- 2.1275. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH TELESCOPE CASUAL
TELESCOPE CASUAL FUR
TECH LOGISTICS
300 ELM STREET
MILFORD NH 03055-4715
- State the term remaining** DATED: 09/19/17
- List the contract number of any government contract** _____
- 2.1276. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH TRANS REDCO FOODS
CASTSTACK WAREHOUSE
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 12/23/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1277. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH TRANS REDCO FOODS
REDCO FOODS DIST CTR
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 12/23/16
- List the contract number of any government contract** _____
- 2.1278. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TECH TRANS REDCO FOODS
REDCO FOODS INC
TECH LOGISTICS
300 ELM ST #1
MILFORD NH 03055-4715
- State the term remaining** DATED: 12/23/16
- List the contract number of any government contract** _____
- 2.1279. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TEMPERATSURE
10606 SOUTH 144TH ST
OMAHA NE 68138-3818
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1280. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TEMPERPACK
P O BOX 7899
RICHMOND VA 23231-0399
- State the term remaining** DATED: 02/08/19
- List the contract number of any government contract** _____
- 2.1281. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TEMPSHIELD INC
TEMPSHEILD INC
P O BOX 199
MOUNT DESERT ME 04660-0199
- State the term remaining** DATED: 10/05/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1282. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TERRABOOST MEDIA
TERRABOOST MEDIA LLC
6114 LASALLE AVE
OAKLAND CA 94611-2802
- State the term remaining** DATED: 03/31/16
- List the contract number of any government contract** _____
- 2.1283. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TERRASMART
9200 ESTERO PARK COM
ESTERO FL 33928-3219
- State the term remaining** DATED: 11/10/15
- List the contract number of any government contract** _____
- 2.1284. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TFM DYNACORN
DYNACORN INTL
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 11/23/15
- List the contract number of any government contract** _____
- 2.1285. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TFM ELITE SPICE
ELITE SPICE
T F M
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 11/23/15
- List the contract number of any government contract** _____
- 2.1286. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TFM KOKE
KOKE INC
TARGET FREIGHT MGMT
5905 BROWNSVILLE RD
PITTSBURGH PA 15236-3507
- State the term remaining** DATED: 11/23/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|---|--|
| 2.1287. | Title of contract SECURITY SERVICES AGREEMENT

State what the contract or lease is for SERVICE CONTRACT

Nature of debtor's interest CLIENT

State the term remaining 1/11/2022

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THE ELECTRIC GUARD DOG LLC
550 ASSEMBLY ST., 5TH FLOOR
COLUMBIA SC 29201 |
| 2.1288. | Title of contract WORKERS COMPENSATION INSURANCE POLICY

State what the contract or lease is for WORKERS COMPENSATION INSURANCE

Nature of debtor's interest INSURED

State the term remaining 3/31/2019

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THE HARTFORD
ONE HARTFORD PLAZA
HARTFORD CT 06155 |
| 2.1289. | Title of contract AGREEMENT WITH POLICY NO. 10WNS35800 EFEFFECTIVE 3/31/2018

State what the contract or lease is for INSURANCE CONTRACT

Nature of debtor's interest INSURED

State the term remaining 3/31/2019

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THE HARTFORD FINANCIAL
SERVICES GROUP INC
ONE HARTFORD PLAZA, T- 7
HARTFORD CT 06155 |
| 2.1290. | Title of contract CHANGE IN CONTROL AGREEMENT

State what the contract or lease is for CHANGE IN CONTROL AGREEMENT

Nature of debtor's interest EMPLOYER

State the term remaining DATED: 05/01/2015

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THOMAS CONNERY
NEW ENGLAND MOTOR FREIGHT,
INC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |
| 2.1291. | Title of contract DEFERRED COMPENSATION AGREEMENT

State what the contract or lease is for DEFERRED COMPENSATION AGREEMENT

Nature of debtor's interest EMPLOYER

State the term remaining DATED: 05/01/2015

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THOMAS CONNERY
NEW ENGLAND MOTOR FREIGHT,
INC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1292. **Title of contract** INSURANCE PREMIUM AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE PREMIUM AGREEMENT
- Nature of debtor's interest** EMPLOYER THOMAS CONNERY
NEW ENGLAND MOTOR FREIGHT,
INC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** DATED: 05/01/2015
- List the contract number of any government contract** _____
- 2.1293. **Title of contract** DESIGNATION OF DESIGNATED BENEFICIARY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** COMPENSATION AGREEMENT
- Nature of debtor's interest** EMPLOYER THOMAS CONNERY
NEW ENGLAND MOTOR FREIGHT,
INC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** DATED: 07/08/2015
- List the contract number of any government contract** _____
- 2.1294. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER THOMAS TRANSPORT
THOMAS TRANSPORT DEL
9055 FREEWAY DRIVE
MACEDONIA OH 44056
- State the term remaining** DATED: 02/24/17
- List the contract number of any government contract** _____
- 2.1295. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER THREE SIXTY SOLUTION
P O BOX 1
LEROY NY 14482-0001
- State the term remaining** DATED: 06/09/16
- List the contract number of any government contract** _____
- 2.1296. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER THRESHOLD ENTERPRISES
THRESHOLD ENTERPRISE
23 JANIS WAY
SCOTTS VALLEY CA 95066-3546
- State the term remaining** DATED: 11/12/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1297. **Title of contract** LETTER OF EXTENSION **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LEASE OF REAL PROPERTY LOCATED AT 38 OLD KAMER ROAD, COLONIE, NY 12205
- Nature of debtor's interest** LESSEE THRU VIEW, LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** EXPIRATION 1/31/2017
- List the contract number of any government contract** _____
- 2.1298. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TI COMPOSITES ONE
COMPOSITES ONE LLC
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 09/19/17
- List the contract number of any government contract** _____
- 2.1299. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TI DIAMOND PCK
DIAMOND PAPER BOX CO
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 02/04/19
- List the contract number of any government contract** _____
- 2.1300. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TI DIAMOND PCK
DIAMOND PACKAGING
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 09/19/17
- List the contract number of any government contract** _____
- 2.1301. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TI DISC GRAPHICS
DISC GRAPHICS INC
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230
- State the term remaining** DATED: 01/05/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1302. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TI DISC GRAPHICS
DISC GRAPHICS
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1303. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/19/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TI GLASSFLOSS
GLASFLOSS
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1304. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TI INTL PCK
INTL ACCESSORIES
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1305. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TI INTL PCK
INTL DISPLAY
TRANS INSIGHT
P O BOX 23000
HICKORY NC 28603-0230 |
| 2.1306. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
TI INTL PCK
PRESENTATION BOX &
DISPLAY TRANS INSIG
P O BOX 23000
HICKORY NC 28603-0230 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1307. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TI INTL PCK**
- State the term remaining** DATED: 09/19/17 **INTL PACKAGING CORP**
- List the contract number of any government contract** _____ **TRANS INSIGHT**
HICKORY NC 28603-0230
- 2.1308. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TIFFANY CO**
- State the term remaining** DATED: 03/23/16 **TIFFANY & CO %IRON DA**
- List the contract number of any government contract** _____ **3400 PLAYERS CLUB**
MEMPHIS TN 38125-8915
- 2.1309. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TILE AMERICA CT**
- State the term remaining** DATED: 02/04/16 **TILE AMERICA**
- List the contract number of any government contract** _____ **PO BOX 909-8**
LUDLOW MA 01056
- 2.1310. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TILE AMERICA CT**
- State the term remaining** DATED: 06/25/15 **TILE AMERICA**
- List the contract number of any government contract** _____ **PO BOX 909-8**
LUDLOW MA 01056
- 2.1311. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TILE AMERICA CT**
- State the term remaining** DATED: 06/25/15 **TILE AMERICA**
- List the contract number of any government contract** _____ **PO BOX 909-8**
LUDLOW MA 01056

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|--|--|
| 2.1312. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TILE AMERICA CT
TILE AMERICA
PO BOX 909-8
LUDLOW MA 01056 |
| 2.1313. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TILE AMERICA CT
TILE AMERICA
PO BOX 909-8
LUDLOW MA 01056 |
| 2.1314. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TILE AMERICA CT
TILE AMERICA
PO BOX 909-8
LUDLOW MA 01056 |
| 2.1315. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TILE AMERICA CT
TILE AMERICA
PO BOX 909-8
LUDLOW MA 01056 |
| 2.1316. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TILE AMERICA CT
TILE AMERICA-STAMFOR
P O BOX 909-8
LUDLOW MA 01056 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1317. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TILE AMERICA CT**
- State the term remaining** DATED: 09/13/17 **STANDARD TILE DIST**
- List the contract number of any government contract** _____ **P O BOX 909-8**
LUDLOW MA 01056
- 2.1318. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TOLEDO TERMINAL # 34 REAL PROPERTY LEASE - 1260 MATZINGER ROAD, TOLEDO, OH 43612-3849
- Nature of debtor's interest** LESSEE **TOLEDO TERMINAL LLC**
- State the term remaining** 9/30/2020 **C/O AMZ MANAGEMENT LLC**
- List the contract number of any government contract** _____ **1-71 NORTH AVENUE EAST**
ELIZABETH NJ 07201
- 2.1319. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TOP NOTCH LOGISTICS**
- State the term remaining** DATED: 03/23/16 **2811 GLENMORE AVE**
PITTSBURGH PA 15216-2123
- List the contract number of any government contract** _____
- 2.1320. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TOPAZ LIGHTING**
- State the term remaining** DATED: 05/05/16 **TOPAZ LIGHTING & ELE**
- List the contract number of any government contract** _____ **J A F BOX 2110 PECK**
NEW YORK NY 10272
- 2.1321. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **TOWER LABS**
- State the term remaining** DATED: 03/24/16 **TOWER LABORATORIES**
- List the contract number of any government contract** _____ **P O BOX 306**
CENTERBROOK CT 06409-0306

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1322. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 03/24/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TOWER LABS
TOWER LABORATORIES
P O BOX 306
CENTERBROOK CT 06409-0306 |
| 2.1323. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TRAFFIC TECH
101 ROUND HILL DR
ROCKAWAY NJ 07866-1214 |
| 2.1324. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 05/04/18
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TRAFFIC TECH LTL BLANKET
TRAFFIC TECH
180 N MICHIGAN AVE
CHICAGO IL 60601 |
| 2.1325. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/23/16
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TRAID MECH
TRAID MECHANICAL
P O BOX 1262
WESTMONT IL 60559-3862 |
| 2.1326. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

TRANS WORLD
TRNS WLD ENT%NTL TRF
151 JOHN JAMES AUDUB
AMHERST NY 14228-1111 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1327. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRANSEXPEDITE
TRANS-EXPEDITE
7 FOUNDERS BLVD
EL PASO TX 79906-4912
- State the term remaining** DATED: 06/14/16
- List the contract number of any government contract** _____
- 2.1328. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRANSPORT EXPRESS
3275 MIKE COLLINS DR
EAGAN MN 55121
- State the term remaining** DATED: 12/11/17
- List the contract number of any government contract** _____
- 2.1329. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRANSPORTATION IMPACT
TRANSPORTATION IMPAC
8921 CREW DR
EMERALD ISLE NC 28594-1927
- State the term remaining** DATED: 08/04/17
- List the contract number of any government contract** _____
- 2.1330. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRANS-PRO LOG
TRANS-PRO LOGISTICS
407 MCGILL #910
MONTREAL QC H2Y2G3
- State the term remaining** DATED: 01/18/16
- List the contract number of any government contract** _____
- 2.1331. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TREK FREIGHT SYSTEM
TREK FREIGHT SERVICE
7337 N LINCOLN AVE
LINCOLNWOOD IL 60712-1700
- State the term remaining** DATED: 11/27/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1332. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRIANGLE SUSPENSION
P O BOX 1149
GOODLETTSVILLE TN 37070-1149
- State the term remaining** DATED: 06/28/16
- List the contract number of any government contract** _____
- 2.1333. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRIOSE
TRIOSE %P L S LOGIST
3120 UNIONVILLE RD
CRANBERRY TOWNSHIP PA 16066-3437
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1334. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRISONIC
P O BOX 527018
FLUSHING NY 11352-7018
- State the term remaining** DATED: 10/07/16
- List the contract number of any government contract** _____
- 2.1335. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TRIUMPH ACTUATION
TRIUMPH ACTUATION SY
29 INDUSTRIAL PARK R
EAST LYME CT 06333
- State the term remaining** DATED: 01/15/16
- List the contract number of any government contract** _____
- 2.1336. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TUCKER ROCKY BLUEGRACE
TUCKER-ROCKY DISTRIB
BLUE GRACE
2846 S FALKENBURG RD
RIVERVIEW FL 33568
- State the term remaining** DATED: 05/31/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1337. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TUNSTALL CORP
TUNSTALL CORPORATION
P O BOX 434
SPRINGFIELD MA 01101-0434
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1338. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TWO RIVERS COFFEE
P O BOX 527
SOUTH PLAINFIELD NJ 07080-0527
- State the term remaining** DATED: 01/15/18
- List the contract number of any government contract** _____
- 2.1339. **Title of contract** COMMERCIAL SALES AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SALES CONTRACT
- Nature of debtor's interest** CUSTOMER TYCO INTEGRATED SECURITY
GREGORY WHITE
7852 BROWNING RD
PENNSAUKEN NJ 08109-4642
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.1340. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TYLER DIST
CONTINENTAL LOGISTIC
180 RARITAN CENTER
EDISON NJ 08837-3646
- State the term remaining** DATED: 02/22/17
- List the contract number of any government contract** _____
- 2.1341. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TYTAN INTL
TYTAN INTERNATIONAL
16240 W 110TH STREET
LENEXA KS 66219-1312
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1342. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER TYTAN INTL
16240 W 110TH ST
LENEXA KS 66219-1312
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1343. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER U I D/ALTARE CORP
U I D C/ALTARE CORP
411 FIFTH AVE
NEW YORK NY 10016-2233
- State the term remaining** DATED: 10/29/15
- List the contract number of any government contract** _____
- 2.1344. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER U S NONWOVENS
110 EMJAY BLVD
BRENTWOOD NY 11717-3322
- State the term remaining** DATED: 11/21/16
- List the contract number of any government contract** _____
- 2.1345. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER U S SILT & SITE SUPP
U S SILT
P O BOX 2461
CONCORD NH 03302-2461
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1346. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER U-C COATINGS CORP
U C COATINGS/SYDIA
P O BOX 1066
BUFFALO NY 14215-6066
- State the term remaining** DATED: 06/17/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1347. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER U-C COATINGS CORP
P O BOX 1066
BUFFALO NY 14215-6066
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1348. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER U-C COATINGS CORP
U-C COATINGS LLC
P O BOX 1066
BUFFALO NY 14215-6066
- State the term remaining** DATED: 09/07/16
- List the contract number of any government contract** _____
- 2.1349. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNCOMMON CARRIER LOG
UNCOMMON LOGISTICS
40 CAMPUS DRIVE
KEARNY NJ 07032-6511
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1350. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNGERER INC
4 BRIDGE WATER LANE
LINCOLN PARK NJ 07035-1491
- State the term remaining** DATED: 04/30/18
- List the contract number of any government contract** _____
- 2.1351. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNIMED MIDWEST INC
21370 HEYWOOD AVE
LAKEVILLE MN 55044-9522
- State the term remaining** DATED: 05/10/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1352. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNIPAC
UNIPAC SHIPPING
1768 W SECOND STREET
POMONA CA 91766-1206
- State the term remaining** DATED: 05/27/16
- List the contract number of any government contract** _____
- 2.1353. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNISOURCE SHIPPING
4711 FORT HAMILTON
BROOKLYN NY 11219-2927
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1354. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PHILADELPHIA TERMINAL # 60 REAL PROPERTY LEASE -
1618 UNION AVENUE, PENNSAUKEN, NJ 08110
- Nature of debtor's interest** LESSEE UNITED EXPRESS LINES, INC.
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1355. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNITED FOOD CORP
UNITED FOODS CORP
P O BOX 188
MILLTOWN NJ 08850-0188
- State the term remaining** DATED: 02/09/18
- List the contract number of any government contract** _____
- 2.1356. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNITED PRINTING
29 HENRY ST
NEW YORK NY 10002-6928
- State the term remaining** DATED: 04/05/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1357. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNITED SOLUTIONS
P O BOX 358
LEOMINSTER MA 01453-0358
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1358. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNITED SOLUTIONS INC
UNITED SOLUTIONS
P O BOX 358
LEOMINSTER MA 01453-0358
- State the term remaining** DATED: 11/28/17
- List the contract number of any government contract** _____
- 2.1359. **Title of contract** INDEMNITY AGREEMENT EFFECTIVE MARCH 31, 2001 & AMENDMENTS 1-6 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INSURANCE CONTRACT
- Nature of debtor's interest** INSURED UNITED STATES FIDELITY & GUARANTY COMPANY
C/O DISCOVERY MANAGERS LTD
ATTN: CREDIT OFFICER
30 WATERSIDE DRIVE
FARMINGTON CT 06032
- State the term remaining** 12 MONTHS SUBJECT TO UNLIMITED NUMBER OF AUTOMATIC RENEWALS
- List the contract number of any government contract** _____
- 2.1360. **Title of contract** GENERAL LIABILITY - CANADA **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 5951007981
- Nature of debtor's interest** INSURED UNITED STATES FIRE INS CO
305 MADISON AV
MORRISTOWN NJ 07960
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____
- 2.1361. **Title of contract** GENERAL LIABILITY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** POLICY NO. 5951007981
- Nature of debtor's interest** INSURED UNITED STATES FIRE INS CO
305 MADISON AV
MORRISTOWN NJ 07960
- State the term remaining** 4/10/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|---|--|
| 2.1362. | Title of contract TRUCKER LIABILITY

State what the contract or lease is for POLICY NO. 5951007981

Nature of debtor's interest INSURED

State the term remaining 4/10/2019

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

UNITED STATES FIRE INS CO
305 MADISON AV
MORRISTOWN NJ 07960 |
| 2.1363. | Title of contract MOTOR CARRIER BOND VARIOUS

State what the contract or lease is for POLICY NO. VARIOUS

Nature of debtor's interest INSURED

State the term remaining 4/10/2019

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

UNITED STATES FIRE INS CO (TRINITY)
305 MADISON AV
MORRISTOWN NJ 07960 |
| 2.1364. | Title of contract MOTOR CARRIER PUBLIC LIABILITY SURETY BOND

State what the contract or lease is for SURETY CONTRACT

Nature of debtor's interest MOTOR CARRIER

State the term remaining 1/31/2020

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

UNITED STATES FIRE INSURANCE COMPANY
305 MADISON AVENUE
MORRISTOWN NJ 07960 |
| 2.1365. | Title of contract GENERAL AGREEMENT OF INDEMNITY

State what the contract or lease is for INDEMNITY CONTRACT

Nature of debtor's interest PRINCIPAL

State the term remaining EFFECTIVE APRIL 10, 2018

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

UNITED STATES FIRE INSURANCE COMPANY
305 MADISON AVENUE
MORRISTOWN NJ 07960 |
| 2.1366. | Title of contract COLLATERAL AGREEMENT DATED APRIL 10, 2018

State what the contract or lease is for INSURANCE CONTRACT

Nature of debtor's interest PRINCIPAL

State the term remaining EFFECTIVE APRIL 10, 2018

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

UNITED STATES FIRE INSURANCE COMPANY
305 MADISON AVENUE
MORRISTOWN NJ 07960 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1367. **Title of contract** COLLATERAL AGREEMENT DATED APRIL 10, 2018 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNITY CONTRACT
- Nature of debtor's interest** PRINCIPAL UNITED STATES FIRE INSURANCE COMPANY
- State the term remaining** EFFECTIVE APRIL 26, 2018 AUTOMATICALLY RENEWED WITH LETTER OF CREDIT 305 MADISON AVENUE MORRISTOWN NJ 07960
- List the contract number of any government contract** _____
- 2.1368. **Title of contract** COLLATERAL AGREEMENT DATED APRIL 10, 2018 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNITY CONTRACT
- Nature of debtor's interest** PRINCIPAL UNITED STATES FIRE INSURANCE COMPANY
- State the term remaining** _____ 305 MADISON AVENUE MORRISTOWN NJ 07960
- List the contract number of any government contract** _____
- 2.1369. **Title of contract** GENERAL AGREEMENT OF INDEMNITY DATED APRIL 10, 2018 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNITY CONTRACT
- Nature of debtor's interest** PRINCIPAL UNITED STATES FIRE INSURANCE COMPANY
- State the term remaining** _____ 305 MADISON AVE MORRISTOWN NJ 07960
- List the contract number of any government contract** _____
- 2.1370. **Title of contract** COLLATERAL AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNIFICATION
- Nature of debtor's interest** CONTRACT PARTY UNITED STATES FIRE INSURANCE COMPANY
- State the term remaining** _____ 305 MADISON AVENUE MORRISTOWN NJ 07960
- List the contract number of any government contract** _____
- 2.1371. **Title of contract** COLLATERAL AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** INDEMNIFICATION
- Nature of debtor's interest** CONTRACT PARTY UNITED STATES FIRE INSURANCE COMPANY
- State the term remaining** _____ 305 MADISON AVENUE MORRISTOWN NJ 07960
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1372. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNITED STATES THERMO
1223 HEAT SIPHON LAN
LATROBE PA 15650-6205
- State the term remaining** DATED: 01/18/16
- List the contract number of any government contract** _____
- 2.1373. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS DIRECTORS AND EXECUTIVES PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1374. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS MILTON NEW PLAN 2 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1375. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS MILTON NEW PLAN 1 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1376. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS MILTON NEW PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1377. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS NON UNION PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1378. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS NON UNION MILTON PA PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1379. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS UNION NEW PLAN 2 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1380. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS UNION NEW PLAN 1 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1381. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: CHOICE PLUS UNION PLAN NEW PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1382. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: NON-DIFFERENTIAL PPO OWNERS PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1383. **Title of contract** SUMMARY OF BENEFITS AND COVERAGE: BRONZE CHOICE PLUS NON UNION PLAN **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HEALTH INSURANCE AGREEMENT
- Nature of debtor's interest** INSURED UNITEDHEALTHCARE
9900 BREN RD. E. MN008-T-615
MINNETONKA MN 55343
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____
- 2.1384. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNITHERM
UNITHERM INC
P O BOX 1189
LEBANON OH 45036-5189
- State the term remaining** DATED: 04/11/16
- List the contract number of any government contract** _____
- 2.1385. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNIVERSAL FOREST PRODUCTS
UFPI GORDON
2801 EAST BELTLINE N
GRAND RAPIDS MI 49525-9680
- State the term remaining** DATED: 04/25/16
- List the contract number of any government contract** _____
- 2.1386. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNIVERSAL FOREST PRODUCTS
UNIVERSAL FOREST PRO
2801 EAST BELTLINE N
GRAND RAPIDS MI 49525-9680
- State the term remaining** DATED: 04/25/16
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1387. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNIVERSAL LOG
UNIVERSAL FORWARDING
1360 HAMILTON PKWY
ITASCA IL 60143-1144
- State the term remaining** DATED: 11/17/16
- List the contract number of any government contract** _____
- 2.1388. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNIVERSAL LOGISTICS
2205 KENMORE AVE
BUFFALO NY 14207-1329
- State the term remaining** DATED: 08/04/16
- List the contract number of any government contract** _____
- 2.1389. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNIVERSAL MINERALS
4620 S COACH DRIVE
TUCSON AZ 85714-3442
- State the term remaining** DATED: 12/30/16
- List the contract number of any government contract** _____
- 2.1390. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UNSYON
UNYSON
2000 CLEARWATER DR
OAK BROOK IL 60523-8809
- State the term remaining** DATED: 06/15/18
- List the contract number of any government contract** _____
- 2.1391. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER UPNOVR
P O BOX 199
PELHAM NH 03076-0199
- State the term remaining** DATED: 07/16/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|--|---|
| 2.1392. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 01/16/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

UPPER VALLEY PRESS
P O BOX 459
NORTH HAVERHILL NH 03774-0459 |
| 2.1393. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

UQUALITY AUTO PARTS
16411 SHOEMAKER AVE
CERRITOS CA 90703-2217 |
| 2.1394. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 12/22/16

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

USA TRANS LOGISTICS
U S A TRANS LOGISTIS
302 OSBORNE ST
UNION SC 29379-8267 |
| 2.1395. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 08/04/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

USAT LOGISTICS
USAT
P O BOX 449
VAN BUREN AR 72957-0449 |
| 2.1396. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 09/27/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

USHIP
205 E RIVERSIDE DR
AUSTIN TX 78704-1203 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1397. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER V P SUPPLY CORP
3445 WINTON PLACE
ROCHESTER NY 14623
- State the term remaining** DATED: 01/10/18
- List the contract number of any government contract** _____
- 2.1398. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VACATIONLAND DIST
VACATIONLAND DISTRIB
165 WARREN AVE
WESTBROOK ME 04092-4432
- State the term remaining** DATED: 02/25/16
- List the contract number of any government contract** _____
- 2.1399. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VALCOUR INT L
VALCOUR INT'L
P O BOX 823
FAYETTEVILLE NY 13066-0823
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1400. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VANGUARD PRINTING LL
P O BOX 4560
ITHACA NY 14852-4560
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1401. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VERMONT COPAK LLC
VERMONT CO-PACK LLC
P O BOX 116
CAVENDISH VT 05142-0116
- State the term remaining** DATED: 01/08/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|--|
| 2.1402. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VERMONT WINE MERCHANT
255 S CHAMPLAIN ST
BURLINGTON VT 05401-4881 |
| 2.1403. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 01/18/19
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VESTIL
900 GROWTH PARKWAY
ANGOLA IN 46703-9338 |
| 2.1404. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/20/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VETS CHOICE
90 MARCUS BLVD
DEER PARK NY 11729-4502 |
| 2.1405. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/28/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VICTOR PRINTING
VICTOR PRINTING INC
P O BOX 707
SHARON PA 16146-0707 |
| 2.1406. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/08/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VILLANTI SONS PRINT
VILLANTI & SONS
15 CATAMOUNT DR
MILTON VT 05468-3236 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1407. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/08/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VILLANTI SONS PRINT
VILLANTI & SONS
15 CATAMOUNT DR
MILTON VT 05468-3236 |
| 2.1408. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/08/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VILLANTI SONS PRINT
VILLANTI & SONS PRIN
15 CATAMOUNT DR
MILTON VT 05468-3236 |
| 2.1409. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 07/15/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VIN DISTRIBUTORS
142 AUTUMN STREET
AGAWAM MA 01001-2892 |
| 2.1410. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VIRGINIA FASTENERS
P O BOX 3108
CHESAPEAKE VA 23327-3108 |
| 2.1411. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/17/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VIRTUAL POLYMER
2410 NORTH FOREST RD
GETZVILLE NY 14068-1503 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1412. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VISION PROD
SAMPKO/VISION
56 DOWNING PKWY
PITTSFIELD MA 01201
- State the term remaining** DATED: 09/26/17
- List the contract number of any government contract** _____
- 2.1413. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VISUAL PAK
1909 S WAUKEGAN RD
WAUKEGAN IL 60085-6709
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1414. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VITO MARCELLO
VITO MARCELLO'S ITAL
PO BOX 2232
NORTH CONWAY NH 03860-2232
- State the term remaining** DATED: 04/07/16
- List the contract number of any government contract** _____
- 2.1415. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VITO MARCELLO
VITO MARCELLO'S ITAL
P O BOX 2232
NORTH CONWAY NH 03860-2232
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1416. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VITO MARCELLO
VITO MARCELLOS ITALI
PO BOX 2232
NORTH CONWAY NH 03860-2232
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1417. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER VOGUE BAY
728 BLUECRAB RD
NEWPORT NEWS VA 23606-2578
- State the term remaining** DATED: 02/15/16
- List the contract number of any government contract** _____
- 2.1418. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER VOLVO FINANCIAL SERVICES
7025 ALBERT PICK ROAD, SUITE 105
PO BOX 26131
GREENSBORO NC 27402-6131
- State the term remaining** 12/14/2019
- List the contract number of any government contract** _____
- 2.1419. **Title of contract** PROMISSORY NOTE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER VOLVO FINANCIAL SERVICES
7025 ALBERT PICK ROAD, SUITE 105
PO BOX 26131
GREENSBORO NC 27402-6131
- State the term remaining** 12/20/2019
- List the contract number of any government contract** _____
- 2.1420. **Title of contract** MASTER LOAN AND SECURITY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER VOLVO FINANCIAL SERVICES
7025 ALBERT PICK ROAD, SUITE 105
PO BOX 26131
GREENSBORO NC 27402-6131
- State the term remaining** 02/14/2020
- List the contract number of any government contract** _____
- 2.1421. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER W J RIEGEL RAIL SYSTEMS
W J RIEGEL RAIL SYST
22 HAMILTON ST
GLENMONT NY 12077-4837
- State the term remaining** DATED: 05/29/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1422. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER W M R HILL
W M R HILL & CO INC
P O BOX 646
RICHMOND VA 23218-0646
- State the term remaining** DATED: 05/31/16
- List the contract number of any government contract** _____
- 2.1423. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WALDO PLASTICS
169 COLES CORNER RD
WINTERPORT ME 04496-3621
- State the term remaining** DATED: 10/26/18
- List the contract number of any government contract** _____
- 2.1424. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WARWICK VALLEY WINERY
WARWICK VALLEY WINER
P O BOX 354
WARWICK NY 10990-0354
- State the term remaining** DATED: 07/25/16
- List the contract number of any government contract** _____
- 2.1425. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WASSERSTROM CO
P O BOX 182056
COLUMBUS OH 43213-1360
- State the term remaining** DATED: 04/20/18
- List the contract number of any government contract** _____
- 2.1426. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WATERLOO CONTRACTORS
P O BOX 262
WATERLOO NY 13165-0262
- State the term remaining** DATED: 01/31/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1427. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WATERLOO CONTRACTORS
WATERLOO CONTAINER
P O BOX 262
WATERLOO NY 13165-0262
- State the term remaining** DATED: 02/15/18
- List the contract number of any government contract** _____
- 2.1428. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WATSON FOODS CO
WATSON FOODS CO IN
301 HEFFERNAN DRIVE
WEST HAVEN CT 06516-4139
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1429. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WEAVER MATERIEL SERV
P O BOX 1151
JAMESTOWN NY 14702-1151
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1430. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WEBSTER CAPITAL FINANCE, INC.
3 FARM GLEN BLVD.
FARMINGTON CT 06032
- State the term remaining** 02/15/2020
- List the contract number of any government contract** _____
- 2.1431. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WEBSTER CAPITAL FINANCE, INC.
3 FARM GLEN BLVD.
FARMINGTON CT 06032
- State the term remaining** 01/06/2021
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1432. **Title of contract** LOAN SCHEDULE NO. 6
State what the contract or lease is for LOAN AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining 01/14/2021
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
WEBSTER CAPITAL FINANCE, INC.
344 MAIN STREET
KENSINGTON CT 06037
- 2.1433. **Title of contract** LOAN SCHEDULE
State what the contract or lease is for LOAN AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining 12/06/2020
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
WEBSTER CAPITAL FINANCE, INC.
3 FARM GLEN BLVD.
FARMINGTON CT 06032
- 2.1434. **Title of contract** LOAN SCHEDULE
State what the contract or lease is for LOAN AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining 12/09/2021
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
WEBSTER CAPITAL FINANCE, INC.
3 FARM GLEN BLVD.
FARMINGTON CT 06032
- 2.1435. **Title of contract** LOAN SCHEDULE NO. 1
State what the contract or lease is for LOAN AGREEMENT
Nature of debtor's interest BORROWER
State the term remaining 12/14/2019
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
WEBSTER CAPITAL FINANCE, INC.
344 MAIN STREET
KENSINGTON CT 06037
- 2.1436. **Title of contract** CUSTOMER CONTRACT
State what the contract or lease is for CUSTOMER CONTRACT
Nature of debtor's interest CUSTOMER
State the term remaining DATED: 05/16/17
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
WEGO CHEMICAL
239 GREAT NECK RD
GREAT NECK NY 11021-3301

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1437. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **WEISS ROHLIG**
- State the term remaining** DATED: 06/25/15 **ROHLIG USA LLC**
- List the contract number of any government contract** _____ **1601 ESTES AVENUE**
ELK GROVE VILLAGE IL 60007-5409
- 2.1438. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER **WEISS ROHLIG**
- State the term remaining** DATED: 09/21/17 **L K W LOGISTICS**
- List the contract number of any government contract** _____ **P O BOX 1534**
ELK GROVE VILLAGE IL 60009-1534
- 2.1439. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **WELLS FARGO EQUIPMENT**
- State the term remaining** 02/28/2022 **FINANCE, INC.**
- List the contract number of any government contract** _____ **733 MARQUETTE AVENUE, SUITE**
700
MAC N9306-070
MINNEAPOLIS MN 55402
- 2.1440. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **WELLS FARGO EQUIPMENT**
- State the term remaining** 03/06/2020 **FINANCE, INC.**
- List the contract number of any government contract** _____ **733 MARQUETTE AVENUE, SUITE**
700
MAC N9306-070
MINNEAPOLIS MN 55402
- 2.1441. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER **WELLS FARGO EQUIPMENT**
- State the term remaining** 06/19/2021 **FINANCE, INC.**
- List the contract number of any government contract** _____ **733 MARQUETTE AVENUE, SUITE**
700
MAC N9306-070
MINNEAPOLIS MN 55402

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1442. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 01/23/2022
- List the contract number of any government contract** _____
- 2.1443. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 02/10/2020
- List the contract number of any government contract** _____
- 2.1444. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 02/10/2023
- List the contract number of any government contract** _____
- 2.1445. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 03/27/2022
- List the contract number of any government contract** _____
- 2.1446. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 04/16/2022
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1447. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 04/16/2022
- List the contract number of any government contract** _____
- 2.1448. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 10/29/2022
- List the contract number of any government contract** _____
- 2.1449. **Title of contract** LOAN SCHEDULE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** 3/23/2023
- List the contract number of any government contract** _____
- 2.1450. **Title of contract** MASTER LOAN AND SECURITY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOAN AGREEMENT
- Nature of debtor's interest** BORROWER WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** DATED: 02/28/2014
- List the contract number of any government contract** _____
- 2.1451. **Title of contract** CONTINUING GUARANTY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** GUARANTY
- Nature of debtor's interest** GUARANTOR WELLS FARGO EQUIPMENT FINANCE, INC.
733 MARQUETTE AVENUE, SUITE 700
MAC N9306-070
MINNEAPOLIS MN 55402
- State the term remaining** DATED: 02/28/2014
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | | |
|---------|---|--|---|
| 2.1452. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/22/18
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
WEST PENN WIRE
P O BOX 762
WASHINGTON PA 15301-0762 |
| 2.1453. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 06/25/15
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
WHIRLEY DRINKWORKS
WHIRLEY INDUST INC
P O BOX 988
WARREN PA 16365-0988 |
| 2.1454. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 12/14/16
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
WHITEHOUSE AND SCAPIRO
WHITEHOUSE AND SCAPI
8750 LARKIN RD
SAVAGE MD 20763-3200 |
| 2.1455. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 09/26/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
WHITEROSE FREIGHT
WHITEROSE FREIGHT LL
P O BOX 191153
BROOKLYN NY 11219-7153 |
| 2.1456. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | CUSTOMER CONTRACT
CUSTOMER CONTRACT
CUSTOMER
DATED: 10/10/17
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
WHITNEY BROS
WHITNEY BROS CO
P O BOX 644
KEENE NH 03431-0644 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1457. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WHITNEY ORIGINALS INC
WHITNEY WREATH
P O BOX 157
MACHIAS ME 04654-0157
- State the term remaining** DATED: 02/26/18
- List the contract number of any government contract** _____
- 2.1458. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WHOLESOME SWEETENERS
CONTINENTAL LOGISTI
180 RARITAN CTR PKWY
EDISON NJ 08837-3646
- State the term remaining** DATED: 12/23/16
- List the contract number of any government contract** _____
- 2.1459. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WILDCAT CONTAINER
WILDCAT CONTAINER SE
P O BOX 10368
JACKSONVILLE FL 32207
- State the term remaining** DATED: 05/01/17
- List the contract number of any government contract** _____
- 2.1460. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WILDCAT CONTAINER SERVICES
WILDCAT CONTAINER SE
P O BOX 10368
JACKSONVILLE FL 32207
- State the term remaining** DATED: 05/01/17
- List the contract number of any government contract** _____
- 2.1461. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** NEMF CREDIT & COLLECTION DEPT LOCATION # 90 -
5302 WHEELER ROAD, JORDAN, NY 13080
- Nature of debtor's interest** LESSEE WILLIAM L. ECKER AND TERRY
ECKER
TERRY ECKER
CLAIMS OFFICE
5322 WHEELER RD
JORDAN NY 13080
- State the term remaining** 12/31/2021
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1462. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WINDOW TECH SYSTEMS
P O BOX 2260
MALTA NY 12020-8260
- State the term remaining** DATED: 11/17/16
- List the contract number of any government contract** _____
- 2.1463. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WINDY RIDGE CORP
P O BOX 32
TAMWORTH NH 03886-0032
- State the term remaining** DATED: 02/09/16
- List the contract number of any government contract** _____
- 2.1464. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WINGS WORLDWIDE
210 SUMMIT AVE
MONTVALE NJ 07645-1579
- State the term remaining** DATED: 09/04/15
- List the contract number of any government contract** _____
- 2.1465. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WINSOR WIRE
WINDSOR WIRE
8300 DOW CIRCLE
STRONGSVILLE OH 44136-6607
- State the term remaining** DATED: 10/26/16
- List the contract number of any government contract** _____
- 2.1466. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WINSTON BRANDS
4800 PROVISO DRIVE
MELROSE PARK IL 60163-1301
- State the term remaining** DATED: 09/27/17
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- | | | |
|---------|---|---|
| 2.1467. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 10/05/17

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

WIRE MESH PRODS
WIRE MESH PRODUCTS
P O BOX 1988
YORK PA 17405-1988 |
| 2.1468. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 10/03/18

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

WOOD PRO INC
WOODPRO
P O BOX 363
AUBURN MA 01501-0363 |
| 2.1469. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

WOODSTREAM CORP
P O BOX 1200
LITITZ PA 17543-7012 |
| 2.1470. | Title of contract CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

WOODSTREAM CORP
P O BOX 1200
LITITZ PA 17543-7012 |
| 2.1471. | Title of contract LEASE AGREEMENT

State what the contract or lease is for ERIE TERMINAL # 57 REAL PROPERTY LEASE - 2250 SOUTH WORK STREET, FALCONER, NY 14733

Nature of debtor's interest LESSEE

State the term remaining 12/31/2019

List the contract number of any government contract _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

WORK STREET, LLC
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201 |

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1472. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** NEMF PROPERTIES, CONSTRUCTION & ENVIRONMENTAL DEPT REAL PROPERTY LEASE - 141 EAST 26TH STREET, ERIE, PA 16504
- Nature of debtor's interest** LESSEE WORK STREET, LLC
C/O AMZ MANAGEMENT LLC
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** MONTH TO MONTH
- List the contract number of any government contract** _____
- 2.1473. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WORLD FULFILLMENT
P O BOX 1005
FARMINGTON CT 06034-1005
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1474. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WORLD WAREHOUSE
N F I INDUSTRIES
P O BOX 855
CHAMPLAIN NY 12919-0855
- State the term remaining** DATED: 06/25/15
- List the contract number of any government contract** _____
- 2.1475. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WRAPTITE
WRAPTITE INC
5030 RICHMOND RD
BEDFORD HEIGHTS OH 44146-1329
- State the term remaining** DATED: 09/27/17
- List the contract number of any government contract** _____
- 2.1476. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER WST ENERGY
W S T ENERGY
1701 VANDERBILT RD
BIRMINGHAM AL 35234-1423
- State the term remaining** DATED: 02/22/18
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

- 2.1477. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER XODUS MEDICAL
702 PROMINENCE DR
NEW KENSINGTON PA 15068-7052
- State the term remaining** DATED: 10/18/18
- List the contract number of any government contract** _____
- 2.1478. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER XPO SAMSUNG
SAMSUNG ELECTRONICS
X P O LOGISTICS
P O BOX C
TWO HARBORS MN 55616-0503
- State the term remaining** DATED: 12/19/16
- List the contract number of any government contract** _____
- 2.1479. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER YOYO GLOBAL FREIGHT
409 JOYCE KILMER AVE
NEW BRUNSWICK NJ 08901-4205
- State the term remaining** DATED: 12/06/17
- List the contract number of any government contract** _____
- 2.1480. **Title of contract** CUSTOMER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CUSTOMER CONTRACT
- Nature of debtor's interest** CUSTOMER Z WINE GUY LLC
209 SIGNAL QUAY
CHESAPEAKE VA 23320-9299
- State the term remaining** DATED: 08/16/18
- List the contract number of any government contract** _____
- 2.1481. **Title of contract** LEASE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** BINGHAMTON TERMINAL # 53 REAL PROPERTY LEASE -
91 SULFUR SPRINGS ROAD, OWEGO, NY 13827
- Nature of debtor's interest** LESSEE ZACH CORP.
C/O MYRON P. SHEVELL
1-71 NORTH AVENUE EAST
ELIZABETH NJ 07201
- State the term remaining** 12/31/2019
- List the contract number of any government contract** _____

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

2.1482. **Title of contract** CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ZAPPOS % VEECO SERVI
VEECO SERVICES
6801 WEST SIDE AVE
NORTH BERGEN NJ 07047-6441

2.1483. **Title of contract** CUSTOMER CONTRACT

State what the contract or lease is for CUSTOMER CONTRACT

Nature of debtor's interest CUSTOMER

State the term remaining DATED: 06/25/15

List the contract number of any government contract _____

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ZIPLINE BEVERAGE
2300 W FIFTH AVE
COLUMBUS OH 43215-1003

Fill in this information to identify the case:

Debtor name: New England Motor Freight, Inc.

United States Bankruptcy Court for the: District of New Jersey

Case number (if known): 19-12809

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1. APEX LOGISTICS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	JPMORGAN CHASE BANK, N.A.	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.2. APEX LOGISTICS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	TD BANK	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.3. APEX LOGISTICS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	WELLS FARGO EQUIPMENT FINANCE INC	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.4. APEX LOGISTICS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	CAPITAL ONE, N.A.	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.5. CARRIER INDUSTRIES, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	JPMORGAN CHASE BANK, N.A.	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.6. CARRIER INDUSTRIES, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	TD BANK	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.7. CARRIER INDUSTRIES, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	WEBSTER CAPITAL FINANCE, INC.	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8. CARRIER INDUSTRIES, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	WELLS FARGO EQUIPMENT FINANCE INC	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.9. CARRIER INDUSTRIES, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	EAST WEST BANK	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.10. CARRIER INDUSTRIES, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	CAPITAL ONE, N.A.	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.11. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	CATERPILLAR FINANCIAL SERVICES CORPORATION	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.12. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	JPMORGAN CHASE BANK, N.A.	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.13. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	TD BANK	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.14. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	WEBSTER CAPITAL FINANCE, INC.	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.15. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	WELLS FARGO EQUIPMENT FINANCE INC	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.16. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	SANTANDER BANK	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.17. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	FIFTH THIRD BANK	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Debtor **New England Motor Freight, Inc.**

Case number (if known) **19-12809**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.18. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	DAIMLER TRUST	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.19. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	EAST WEST BANK	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.20. EASTERN FREIGHT WAYS, INC.	I-71 NORTH AVENUE EAST ELIZABETH NJ 07201	CAPITAL ONE, N.A.	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name: New England Motor Freight, Inc.

United States Bankruptcy Court for the: District of New Jersey

Case number (if known): 19-12809

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ Chapter 11 or Chapter 9 Cases: *List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 4/5/2019
MM/DD/YYYY

x

Signature of individual signing on behalf of debtor

Vincent Colistra
Printed name

Chief Restructuring Officer
Position or relationship to debtor